Fill in this information to identify your case:		
United States Bankruptcy Court for the:  Northern District Of Illinois		
Case number (If known):	Chapter you are filing under:  ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13	☐ Check if this is an amended filing

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
	Your full name		
	Write the name that is on your	Gene	
	government-issued picture	First name	First name
	identification (for example, your driver's license or	R.	
	passport).	Middle name	Middle name
	Bring your picture	Behrens	
	identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
	All other names you		
	have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social Security	xxx - xx - 9 4 1 3	xxx - xx
	number or federal	OR	OR
	Individual Taxpayer		
	Identification number	9 xx - xx	9 xx - xx
	(ITIN)		

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Gene R. Behrens Debtor 1 Case number (if known) Middle Na **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. ■ I have not used any business names or EINs. and Employer **Identification Numbers** (EIN) you have used in the last 8 years Business name Business name Include trade names and doing business as names Business name Business name EIN EIN 5. Where you live If Debtor 2 lives at a different address: 495 Fairview Drive Number Street Number Street Mahattan IL 60442 City City State ZIP Code State ZIP Code WILL County County If your mailing address is different from the one If Debtor 2's mailing address is different from above, fill it in here. Note that the court will send yours, fill it in here. Note that the court will send any notices to you at this mailing address. any notices to this mailing address. Number Number Street P.O. Box P.O. Box City City State ZIP Code State ZIP Code 6. Why you are choosing Check one: Check one: this district to file for Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, bankruptcy I have lived in this district longer than in any I have lived in this district longer than in any other district. other district. ☐ I have another reason. Explain. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) (See 28 U.S.C. § 1408.)

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Gene R. Behrens Debtor 1 Case number (if know Middle Part 2: **Tell the Court About Your Bankruptcy Case** 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box. Bankruptcy Code you are choosing to file under Chapter 11 ☐ Chapter 12 ☐ Chapter 13 8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for X No bankruptcy within the Yes. District Case number last 8 years? MM / DD / YYYY District Case number District When Case number MM / DD / YYYY 10. Are any bankruptcy X No cases pending or being Yes. Debtor Relationship to you filed by a spouse who is not filing this case with District When Case number, if known you, or by a business MM / DD / YYYY partner, or by an affiliate? Relationship to you District When Case number, if known MM / DD / YYYY 11. Do you rent your residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12.

this bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

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btor 1 Gene R. Behrens First Name Middle Nam	e Last Name	Case number (if known)
rt 3: Report About Any E	Susinesses You Own as a So	ole Proprietor
Are you a sale proprietor		
Are you a sole proprietor of any full- or part-time	No. Go to Part 4.	
business?	Yes. Name and location of b	ousiness
A sole proprietorship is a business you operate as an	Name of business, if any	
individual, and is not a separate legal entity such as	Name of business, if any	
a corporation, partnership, or LLC.	Number Street	
If you have more than one		
sole proprietorship, use a separate sheet and attach it		
to this petition.	City	State ZIP Code
	_	box to describe your business:
	_	ess (as defined in 11 U.S.C. § 101(27A))
	_	Estate (as defined in 11 U.S.C. § 101(51B))
	_	fined in 11 U.S.C. § 101(53A)) (as defined in 11 U.S.C. § 101(6))
	None of the above	
	Trong of the doore	
Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>	can set appropriate deadlines. I most recent balance sheet, state	11, the court must know whether you are a small business debtor so that it if you indicate that you are a small business debtor, you must attach your tement of operations, cash-flow statement, and federal income tax return or if exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
debtor? For a definition of small	No. I am not filling under Ch	napter 11.
business debtor, see 11 U.S.C. § 101(51D).	No. I am filing under Chapte the Bankruptcy Code.	ter 11, but I am NOT a small business debtor according to the definition in
	Yes. I am filing under Chapte Bankruptcy Code.	er 11 and I am a small business debtor according to the definition in the
Report if You Own	r Have Any Hazardous Pro	perty or Any Property That Needs Immediate Attention
. Do you own or have any	X No	
property that poses or is alleged to pose a threat	☐ Yes. What is the hazard?	
of imminent and		
identifiable hazard to public health or safety?		
Or do you own any		
property that needs immediate attention?	If immediate attention	n is needed, why is it needed?
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		
	Where is the property	
		Number Street
		City State ZIP Code

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Debtor 1

Gene R. Behrens

Middle Name

Last Name

Case number (if known)\_\_\_\_\_

Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1	
----------------	--

You must check one:

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
  - Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
- □ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:
  - I have a mental illness or a mental deficiency that makes me
    - incapable of realizing or making rational decisions about finances.
  - ☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or
    - through the internet, even after I reasonably tried to do so.
  - Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- □ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
  - Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:
  - ☐ Incapacity. I have a mental illness or a mental deficiency that makes me
    - incapable of realizing or making rational decisions about finances.
  - Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
  - Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor	1	
--------	---	--

Gene R2, Behrens
Fied Name Middle Name

I not blue

Case number (# known)\_\_\_\_\_

	What kind of debts do	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
,	you nave!	<ul><li>No. Go to line 16b.</li><li>X Yes. Go to line 17.</li></ul>				
			ly business debts? Business debts vestment or through the operation of the			
		<ul><li>□ No. Go to line 16c.</li><li>□ Yes. Go to line 17.</li></ul>				
		16c. State the type of debts you	owe that are not consumer debts or bus	siness debts.		
	Are you filing under Chapter 7?	☐ No. I am not filing under Ch	apter 7. Go to line 18.			
1	Do you estimate that after any exempt property is excluded and administrative expenses	administrative expense  No	er 7. Do you estimate that after any exer s are paid that funds will be available to	npt property is excluded and distribute to unsecured creditors?		
i	are paid that funds will be available for distribution to unsecured creditors?	Yes				
1	How many creditors do you estimate that you owe?	<ul><li>☑ 1-49</li><li>☐ 50-99</li><li>☐ 100-199</li><li>☐ 200-999</li></ul>	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000		
(	How much do you estimate your assets to be worth?	□ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
•	How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
ar	t 7: Sign Below					
or	you	I have examined this petition, ar correct.	nd I declare under penalty of perjury that	the information provided is true and		
			apter 7, I am aware that I may proceed, understand the relief available under ea	if eligible, under Chapter 7, 11,12, or 13 ach chapter, and I choose to proceed		
			d I did not pay or agree to pay someone and read the notice required by 11 U.S.	who is not an attorney to help me fill out C. § 342(b).		
		I request relief in accordance wi	th the chapter of title 11, United States (	Code, specified in this petition.		
			It in fines up to \$250,000, or imprisonm	g money or property by fraud in connection ent for up to 20 years, or both.		
		* Gen R. Be	L			
		Signature of Debtor 1	Signatul	re of Debtor 2		
		Executed on 10 1.14/	Lo[7 Execute	d on		

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Eugene R. Behrens Debtor 1 Case number (# known) I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility For your attorney, if you are to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief represented by one available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no If you are not represented knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. by an attorney, you do not need to file this page. Date Signature of Attorney for Debtor Dennis M. Sbertoli Printed name Sbertoli Law Office Firm name P.O. Box 1482 Number Street La Grange Park 60526 IL City State ZIP Code

Contact phone (708) 579-9724

ARDC # 3128965

Bar number

dsbert4978@aol.com

Email address

IL

State

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Debtor 1	Gene R. Bel			Case number (# known)	
	First Name	Middle Name	a Last Name		
	attorney, if you	ou are	to proceed under Chapter 7, 11, 1 available under each chapter for	amed in this petition, declare that I have info 12, or 13 of title 11, United States Code, and which the person is eligible. I also certify the	d have explained the relief at I have delivered to the debtor(s)
by an att	e not represer corney, you do file this page.		knowledge after an inquiry that the	§ 342(b) and, in a case in which § 707(b)(4) to information in the schedule's filed with the	petition is incorrect.    Column   Colu
			Dennis M. Sbertoli		·
			Sbertoli Law Office Firm name		
			P.O. Box 1482 Number Street		
			La Grange Park	IL State	60526 ZIP Code
			,	Sale	Ell Oods
			Contact phone (708) 579-9724	Email address	dsbert4978@aol.com
			ARDC # 3128965	IL	

State

Bar number

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		Document Page 9 of 59		
Fill in th	is information to identify your case and thi			
Debtor 1	Gene R. First Name Middle Name	Behrens Last Name		
Debtor 2	Lilar Mante	Last Name		
	filing) First Name Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the: Northern Distri	ct of Illinois		
Case num				
Case num	1001			Check if this is an
				amended filing
Offic	ial Form 106A/B			
Sch	nedule A/B: Propert	У		12/15
respons	sible for supplying correct information. If mour name and case number (if known). Answ	ete and accurate as possible. If two married people ore space is needed, attach a separate sheet to the wer every question.  Land, or Other Real Estate You Own or Have the second or th	is form. On the top of a	
1. Do yo	ou own or have any legal or equitable intere	st in any residence, building, land, or similar prop	erty?	
□ N	o. Go to Part 2.			
X Y	es. Where is the property?			
		What is the property? Check all that apply.	Do not deduct secured cla	
1.1.	495 Fairview Dr.	□ Single-family home     □ Duplex or multi-unit building	the amount of any secure Creditors Who Have Clair	
	Street address, if available, or other description	Condominium or cooperative	Current value of the	Current value of the
		Manufactured or mobile home	entire property?	portion you own?
		- Land	\$120,000.00	\$ 120,000.00
	Manhattan IL 60442	Investment property	Describe the mature	
	City State ZIP Code	Timeshare	Describe the nature of interest (such as fee	
		U Other	the entireties, or a life	e estate), if known.
		Who has an interest in the property? Check one.	Fee Simple Owne	rship
	Will	☑ Debtor 1 only		
	County	Debtor 2 only Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
		At least one of the debtors and another	(see instructions)	
		Other information you wish to add about this it property identification number:	em, such as local	
If you	own or have more than one, list here:			
		What is the property? Check all that apply.	Do not deduct secured cla	
1.2.		Single-family home	the amount of any secure Creditors Who Have Clair	
1.2.	Street address, if available, or other description	☐ Duplex or multi-unit building ☐ Condominium or cooperative		
		Manufactured or mobile home	Current value of the entire property?	portion you own?
		Land	\$	\$
		☐ Investment property		
	City State ZIP Code	☐ Timeshare	Describe the nature of interest (such as fee	
	3,000	Other	the entireties, or a life	
		Who has an interest in the property? Check one.		
		Debtor 1 only		
	County	Debtor 2 only	_	
		Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
		At least one of the debtors and another	(see instructions)	

property identification number:

Other information you wish to add about this item, such as local

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1.3. Street add	ress. if available	e, or other description	What is the property? Check all that apply.  ☐ Single-family home ☐ Duplex or multi-unit building	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
		,	☐ Condominium or cooperative	Current value of the	
			☐ Manufactured or mobile home	entire property?	portion you own?
			☐ Land	\$	\$
City		State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
			Who has an interest in the property? Check one.		
			Debtor 1 only		
County			Debtor 2 only	_	
			Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
			At least one of the debtors and another	(see instructions)	
			Other information you wish to add about this ite property identification number:	em, such as local	
add the dollar v	value of the p	ortion you own for a	II of your entries from Part 1, including any entrie	s for pages	a 120 000 00
			here.	_	\$120,000.00
you own, lease		al or equitable intere	st in any vehicles, whether they are registered or e, also report it on Schedule G: Executory Contracts		s
you own, lease own that somed Cars, vans, trud	e, or have leg	al or equitable intere	e, also report it on Schedule G: Executory Contracts		s
you own, lease own that someo	e, or have leg	al or equitable intere	e, also report it on Schedule G: Executory Contracts		S
you own, lease own that somed Cars, vans, trud	e, or have leg	al or equitable intere	e, also report it on Schedule G: Executory Contracts	and Unexpired Leases.  Do not deduct secured cla	aims or exemptions. Put
you own, lease own that some Cars, vans, true No Yes	e, or have leg	al or equitable intere s. If you lease a vehicl sport utility vehicles	e, also report it on Schedule G: Executory Contracts i, motorcycles  Who has an interest in the property? Check one.  Debtor 1 only	Do not deduct secured clathe amount of any secure.	aims or exemptions. Put d claims on <i>Schedule D:</i>
you own, lease own that some own that some own.  Cars, vans, true  No  Yes  3.1. Make:  Model:	e, or have leg	al or equitable interests. If you lease a vehicles	e, also report it on Schedule G: Executory Contracts i, motorcycles  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Claim	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property.
you own, lease own that some own that some own.  Cars, vans, true No Yes  3.1. Make: Model: Year:	e, or have leg one else drive cks, tractors,	al or equitable interes. If you lease a vehicles sport utility vehicles  Chvrolet  Camaro  2016	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secure.	aims or exemptions. Put d claims on <i>Schedule D:</i>
you own, lease own that some own that some own.  Cars, vans, true  No  Yes  3.1. Make:  Model:  Year:  Approxim	e, or have leg one else drive cks, tractors,	al or equitable interes. If you lease a vehicles sport utility vehicles  Chvrolet  Camaro  2016	e, also report it on Schedule G: Executory Contracts i, motorcycles  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Claim	aims or exemptions. Put d claims on <i>Schedule D:</i> ms Secured by Property. <b>Current value of th</b>
you own, lease own that some own that some own.  Cars, vans, true  No  Yes  3.1. Make:  Model:  Year:  Approxim  Other info	e, or have leg one else drive cks, tractors,	al or equitable interes. If you lease a vehicles sport utility vehicles Chvrolet Camaro 2016 30,000	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Claim	aims or exemptions. P d claims on Schedule ms Secured by Proper Current value of
you own, lease own that some own or hat some own or had some own or hat some own or had some own or had some own or had some	e, or have legone else drivecks, tractors, tractors, eate mileage: ormation: t value takends .com	al or equitable interes. If you lease a vehicles sport utility vehicles Chvrolet Camaro 2016 30,000	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	Do not deduct secured clathe amount of any secure Creditors Who Have Claim  Current value of the entire property?	aims or exemptions. Put d claims on Schedule D ns Secured by Property  Current value of t portion you own? \$ 16,442.00  aims or exemptions. Put d claims on Schedule D ns Secured by Property  Current value of t
you own, lease own that some own or hat some own or had some own or hat some own or had some own or had some own or had some	e, or have legone else drive cks, tractors, tractors, tractors cormation: t value take ds .com	al or equitable interes. If you lease a vehicles  Sport utility vehicles  Chvrolet  Camaro  2016  30,000  en from	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure. Creditors Who Have Clain Current value of the entire property? \$ 16,442.00  Do not deduct secured clathe amount of any secure. Creditors Who Have Clain Current value of the	aims or exemptions. Put d claims on Schedule D: ms Secured by Property.  Current value of th portion you own?  \$_16,442.00  aims or exemptions. Put d claims on Schedule D:

Filed 10/18/17 Entered 10/18/17 13:58:59 Case 17-31206 Doc 1 Desc Main Gene Behrer Document Page 11 of 59 number (if known) Debtor 1 Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put 3.3. the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions) Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only portion you own? entire property? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☐ No X Yes Who has an interest in the property? Check one. Chevrolet 4.1. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Express Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2014 Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? 1GB3G3BG8E1211554 Surrendered to Creditor ☐ Check if this is community property (see s 16,732.00 10/16/2017. See also instructions) SoFA. If you own or have more than one, list here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another ☐ Check if this is community property (see instructions)

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

16,442.00

Debtor 1

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Part 3: Describe Your Personal and Household Items	
Do you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
6. Household goods and furnishings	
Examples: Major appliances, furniture, linens, china, kitchenware	
□ No	
Yes. Describe Living room furniture, bedroom furniture, misc., lamps, end tables,, kitchen utensils and appliances.	\$ <u>1,200.00</u>
7. Electronics	
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
■ No	
Yes. Describe	\$
8. Collectibles of value	
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles  No	
Yes. Describe	\$
9. Equipment for sports and hobbies	
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
ĭ No	
Yes. Describe	\$
10. Firearms  Examples: Pistols, rifles, shotguns, ammunition, and related equipment  No  Yes. Describe	\$
11. Clothes  Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
No Mice parte chiefe phase etc.	
Yes. DescribeMisc., pants, shirts, shoes etc.	\$200.00
12. Jewelry	
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
□ No □ Yes. DescribeOne man's watch,	\$ 50.00
13. Non-farm animals	
Examples: Dogs, cats, birds, horses	
No No	
Yes. Describe	\$
14. Any other personal and household items you did not already list, including any health aids you did not list	
No No	
Yes. Give specific information	\$
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	<b>\$1,450.00</b>
IVI I WILL OF TALLIER HIGH HIGHER HIGHER	

Debtor 1

Case 17-31206 Doc 1 Filed 10/18/17 Entered 10/18/17 13:58:59 Desc Main Behren Socument Page 13 of 59 number (# known)

17.2. Checking account:  17.3. Savings account:  First Bank of Manhattan  \$40.  17.4. Savings account:  \$ 17.5. Certificates of deposit:  \$ 17.6. Other financial account:  \$ 17.7. Other financial account:  \$ 17.8. Other financial account:  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	ney kking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, other similar institutions. If you have multiple accounts with the same institution, list each.  Institution name:  17.1. Checking account:  17.2. Checking account:  17.3. Savings account:  17.4. Savings account:  17.5. Certificates of deposit:  17.6. Other financial account:  17.7. Other financial account:  17.9. Institution or issuer name:		legal or equitable interest in	any of the following?	Current value of the portion you own?  Do not deduct secured claim or exemptions.
No   Yes   Cash:   \$	ney kking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, other similar institutions. If you have multiple accounts with the same institution, list each.  Institution name:  17.1. Checking account:  17.2. Checking account:  17.3. Savings account:  17.4. Savings account:  17.5. Certificates of deposit:  17.6. Other financial account:  17.7. Other financial account:  17.9. Institution or issuer name:	16. Cash			
Yes   Cash:   \$     To Deposits of money   Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.   No   Institution name:	hey king, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, other similar institutions. If you have multiple accounts with the same institution, list each.  Institution name:  17.1. Checking account:  17.2. Checking account:  17.3. Savings account:  17.4. Savings account:  17.5. Certificates of deposit:  17.6. Other financial account:  17.7. Other financial account:  17.9. Other financial account:  18. Institution or issuer name:	Examples: Money you	have in your wallet, in your hon	ne, in a safe deposit box, and on hand when you file you	r petition
17. Deposits of money  Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.  No  Institution name:  17.1. Checking account:  17.2. Checking account:  17.3. Savings account:  17.4. Savings account:  17.5. Certificates of deposit:  17.6. Other financial account:  17.7. Other financial account:  17.8. Other financial account:  18. Savings account:  18. Savings account:  19. Savings a	ney king, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, other similar institutions. If you have multiple accounts with the same institution, list each.  Institution name:  17.1. Checking account:  17.2. Checking account:  17.3. Savings account:  17.4. Savings account:  17.5. Certificates of deposit:  17.6. Other financial account:  17.7. Other financial account:  17.9. Other financial account:  18. Institution or issuer name:				
Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.  No  Institution name:  17.1. Checking account:  17.2. Checking account:  17.3. Savings account:  17.4. Savings account:  17.5. Certificates of deposit:  17.6. Other financial account:  17.7. Other financial account:  17.8. Other financial account:  18. Other financial account:	Asking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, other similar institutions. If you have multiple accounts with the same institution, list each.  Institution name:  17.1. Checking account:  17.2. Checking account:  17.3. Savings account:  17.4. Savings account:  17.5. Certificates of deposit:  17.6. Other financial account:  17.7. Other financial account:  17.8. Other financial account:  17.9. Other financial account:  18. Institution or issuer name:	Yes	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Cash:	\$
Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.  No  Institution name:  17.1. Checking account:  17.2. Checking account:  17.3. Savings account:  17.4. Savings account:  17.5. Certificates of deposit:  17.6. Other financial account:  17.7. Other financial account:  17.8. Other financial account:  18. Other financial account:	Asking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, other similar institutions. If you have multiple accounts with the same institution, list each.  Institution name:  17.1. Checking account:  17.2. Checking account:  17.3. Savings account:  17.4. Savings account:  17.5. Certificates of deposit:  17.6. Other financial account:  17.7. Other financial account:  17.8. Other financial account:  17.9. Other financial account:  18. Institution or issuer name:				
No         Institution name:           17.1. Checking account:         First Bank of Manhattan           17.2. Checking account:         \$	Institution name:  17.1. Checking account:  17.2. Checking account:  17.3. Savings account:  17.5. Certificates of deposit:  17.6. Other financial account:  17.7. Other financial account:  17.9. Other financial account:  1	Examples: Checking, s	avings, or other financial accou	unts; certificates of deposit; shares in credit unions, brok aultiple accounts with the same institution, list each.	erage houses,
17.1. Checking account:  17.2. Checking account:  17.3. Savings account:  17.4. Savings account:  17.5. Certificates of deposit:  17.6. Other financial account:  17.7. Other financial account:  17.8. Other financial account:  17.8. Other financial account:  17.8. Other financial account:  17.9. Other financial account:	17.1. Checking account:  17.2. Checking account:  17.3. Savings account:  17.4. Savings account:  17.5. Certificates of deposit:  17.6. Other financial account:  17.7. Other financial account:  17.9. Other financial account:  \$  S  S  S  S  S  S  S  S  S  S  S  S				
17.2. Checking account:  17.3. Savings account:  First Bank of Manhattan  \$40.  17.4. Savings account:  \$ 17.5. Certificates of deposit:  \$ 17.6. Other financial account:  \$ 17.7. Other financial account:  \$ 17.8. Other financial account:  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	17.2. Checking account:  17.3. Savings account:  17.4. Savings account:  17.5. Certificates of deposit:  17.6. Other financial account:  17.7. Other financial account:  17.8. Other financial account:  17.9. Other financial account:  17.9. Other financial account:  17.9. Other financial account:  17.9. Other financial account:  18. Institution or issuer name:	X Yes		Institution name:	
17.2. Checking account:  17.3. Savings account:  First Bank of Manhattan  \$ 40.  17.4. Savings account:  \$ 5.  17.5. Certificates of deposit:  17.6. Other financial account:  \$ 5.  17.7. Other financial account:  \$ 5.  17.8. Other financial account:  \$ 5.	17.2. Checking account:  17.3. Savings account:  17.4. Savings account:  17.5. Certificates of deposit:  17.6. Other financial account:  17.7. Other financial account:  17.8. Other financial account:  17.9. Other financial account:  17.9. Other financial account:  17.9. Other financial account:  17.9. Other financial account:  18. Institution or issuer name:		17.1. Checking account:	First Bank of Manhattan	\$1,000.00
17.3. Savings account:  First Bank of Manhattan  \$40.  17.4. Savings account:  \$ 17.5. Certificates of deposit:  \$ 17.6. Other financial account:  \$ 17.7. Other financial account:  \$ 17.8. Other financial account:  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	17.3. Savings account:  17.4. Savings account:  17.5. Certificates of deposit:  17.6. Other financial account:  17.7. Other financial account:  17.8. Other financial account:  17.9. Other financial account:  17.9. Other financial account:  17.9. Institution or issuer name:		-		\$
17.4. Savings account:  17.5. Certificates of deposit:  17.6. Other financial account:  17.7. Other financial account:  17.8. Other financial account:  \$	17.4. Savings account:  17.5. Certificates of deposit:  17.6. Other financial account:  17.7. Other financial account:  17.8. Other financial account:  17.9. Other financial account:  17.9. Other financial account:  \$  funds, or publicly traded stocks    funds, investment accounts with brokerage firms, money market accounts    Institution or issuer name:			First Bank of Manhattan	\$40.00
17.6. Other financial account:  17.7. Other financial account:  \$	17.6. Other financial account:  17.7. Other financial account:  17.8. Other financial account:  17.9. Other financial account:  \$  funds, or publicly traded stocks  funds, investment accounts with brokerage firms, money market accounts  Institution or issuer name:  \$  \$  17.6. Other financial account:  \$  \$  \$  Institution or issuer name:  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$				\$
17.6. Other financial account:  17.7. Other financial account:  \$	17.6. Other financial account:  17.7. Other financial account:  17.8. Other financial account:  17.9. Other financial account:  \$  funds, or publicly traded stocks  funds, investment accounts with brokerage firms, money market accounts  Institution or issuer name:  \$  \$  \$  17.6. Other financial account:  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$		17.5. Certificates of deposit:		\$
17.8. Other financial account:	17.8. Other financial account:  17.9. Other financial account:  \$  funds, or publicly traded stocks  funds, investment accounts with brokerage firms, money market accounts  Institution or issuer name:  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$		17.6. Other financial account:		
	funds, or publicly traded stocks funds, investment accounts with brokerage firms, money market accounts  Institution or issuer name:  \$		17.7. Other financial account:		\$
17.9. Other financial account:\$	funds, or publicly traded stocks  funds, investment accounts with brokerage firms, money market accounts  Institution or issuer name:		17.8. Other financial account:		\$
	funds, investment accounts with brokerage firms, money market accounts  Institution or issuer name:  \$\$		17.9. Other financial account:		\$
	funds, investment accounts with brokerage firms, money market accounts  Institution or issuer name:  \$\$				
	funds, investment accounts with brokerage firms, money market accounts  Institution or issuer name:  \$\$				
18. Bonds, mutual funds, or publicly traded stocks  Examples: Bond funds, investment accounts with brokerage firms, money market accounts	Institution or issuer name:				
☑ No	s			erage firms, money market accounts	
Yes Institution or issuer name:		Examples: Bond funds,		erage firms, money market accounts	
<u> </u>		Examples: Bond funds,  No	investment accounts with brok	erage firms, money market accounts	
\$	\$	Examples: Bond funds,  No	Institution or issuer name:		\$\$
	5	Examples: Bond funds,  No	Investment accounts with brok		
	ų –	Examples: Bond funds,  No	Investment accounts with brok		<u> </u>
	•	Examples: Bond funds,  No	Investment accounts with brok		\$
<u> </u>	Ψ	Examples: Bond funds,  No	Investment accounts with brok		
		Examples: Bond funds,  No	Investment accounts with brok		\$
	aded stock and interests in incorporated and unincorporated businesses, including an interest in	Examples: Bond funds,  No Yes	Institution or issuer name:		\$\$ \$\$
19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture  No Name of entity: % of ownership:	aded stock and interests in incorporated and unincorporated businesses, including an interest in rship, and joint venture  Name of entity: % of ownership:	Examples: Bond funds,  No Yes  19. Non-publicly traded s an LLC, partnership,	Institution or issuer name:  stock and interests in incorporated point venture	rated and unincorporated businesses, including an	\$ssinterest in
19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture  □ No Name of entity: % of ownership: □ Yes. Give specific GenoB Snacks, Inc. 100 % \$1,00	aded stock and interests in incorporated and unincorporated businesses, including an interest in rship, and joint venture  Name of entity:  Secific GenoB Snacks, Inc.  Name of entity:  100 % \$1,000.00	Examples: Bond funds,  No Yes  19. Non-publicly traded s an LLC, partnership, and No Yes. Give specific	Institution or issuer name:  stock and interests in incorporand joint venture  Name of entity:	rated and unincorporated businesses, including an	sssinterest in
19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture  No Name of entity:  Yes. Give specific information about  Senob Snacks, Inc.  100 % \$1,0	aded stock and interests in incorporated and unincorporated businesses, including an interest in rship, and joint venture  Name of entity:  GenoB Snacks, Inc.  100 % \$1,000.00	Examples: Bond funds,  No Yes  19. Non-publicly traded s an LLC, partnership, s No Yes. Give specific information about	Institution or issuer name:  stock and interests in incorporand joint venture  Name of entity:	rated and unincorporated businesses, including an	\$sssssssss_

Case 17-31206 Entered 10/18/17 13:58:59 Doc 1 Filed 10/18/17 Desc Main Gene Behren Document Page 14 of 59 humber (# known) Debtor 1 First Name 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. X No ☐ Yes. Give specific Issuer name: information about them..... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans X No Yes. List each account separately.. Type of account: Institution name: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others × No ☐ Yes..... Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: \_\_\_ Prepaid rent: Telephone: Water: Rented furniture: Other: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) X No

☐ Yes.....

Issuer name and description:

Debtor 1

Case 17-31206 Doc 1

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Behren Socument Page 15 of 59 number (# known)

Desc Main

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ☐ Yes ...... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit X No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements X No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses X No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you X No ☐ Yes. Give specific information Federal: about them, including whether you already filed the returns State: and the tax years..... Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement Yes. Give specific information..... Alimony: Maintenance: Support: Divorce settlement: Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else X No Yes. Give specific information......

Filed 10/18/17 Entered 10/18/17 13:58:59 Case 17-31206 Desc Main Gene Behren Document Page 16 of 59 number (# known) Debtor 1 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value. ... 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. X No ☐ Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue Yes. Describe each claim..... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims X No ☐ Yes. Describe each claim...... 35. Any financial assets you did not already list X No ☐ Yes. Give specific information...... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$2,040.00 for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. X Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned x No ☐ Yes. Describe......

Official Form 106A/B

☐ No

39. Office equipment, furnishings, and supplies

Yes. Describe ...... Desktop computer, combo printer, monitor.

Schedule A/B: Property

Examples: Business-related computers, software, moderns, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

page 8

\$250.00

Debtor 1	Case 17-31206 Doc 1 Filed 10/18/17 Entered 10/18/17 Gene R. Behrer ocument Page 17 ofc59num		
	, fixtures, equipment, supplies you use in business, and tools of your trade		
X No			
Yes. [	escribe		S
			1
41. Inventory  No			
	escribe		S
- 103.1	000100		φ
	n partnerships or joint ventures		
⊠ No			
Yes. I	escribe Name of entity:	% of ownership:	
		%	\$
		%	\$
		%	\$
	lists, mailing lists, or other compilations		
⊠ No		(444)	
	o your lists include personally identifiable information (as defined in 11 U.S.C. § 101	(41A))?	
	No Yes. Describe		
,	Yes. Describe		\$
44. Any busii	ess-related property you did not already list		
■ No			
	tive specific		\$
intom	auon		\$
			\$
			\$
			\$
			\$
	ollar value of all of your entries from Part 5, including any entries for pages you ha		\$250.00
for Part 5	Write that number here	·····	
	escribe Any Farm- and Commercial Fishing-Related Property You Own o you own or have an interest in farmland, list it in Part 1.	r Have an Interest	in.
	,		
	n or have any legal or equitable interest in any farm- or commercial fishing-related	property?	
46. Do vou o			
	to Part 7.		
🗵 No. G			
🗵 No. G	to Part 7.		Current value of the
☒ No. G	to Part 7.		portion you own?
🗵 No. G	to Part 7.		portion you own?  Do not deduct secured claims
No. G     Yes. 0	o to Part 7. o to line 47.		portion you own?
No. G Yes. 0	o to Part 7. o to line 47.		portion you own?  Do not deduct secured claims
No. G Yes. 0	o to Part 7. o to line 47.		portion you own?  Do not deduct secured claims
No. G Yes. C  47. Farm ani Examples	o to Part 7. o to line 47.		portion you own?  Do not deduct secured claims
No. G Yes. C  47. Farm ani Examples	nals Livestock, poultry, farm-raised fish		portion you own?  Do not deduct secured claims

Debtor 1	Case 17 Gene		Filed 10/18	8/17 Entered nt Page 18	I 10/18/17 13: Ofc59number (# know	58:59 De	sc Main
Crops	ither growing	g or harvested					
⊠ No	attrier growing	g or narvested					
	Give specific nation						\$
Farm and	l fishing equi	pment, implements, machi	inery, fixtures,	and tools of trade			
Farm and	l fishina suni	olies, chemicals, and feed					\$
No		ones, enemiedie, and recu					
☐ Yes	***************************************						\$
	- and comme	rcial fishing-related prope	rty you did not	already list			
No Yes.	Give specific						
inform	nation						\$
		f all of your entries from P					\$0.00
inform	Give specific nation	f all of your entries from Pa	art 7. Write tha	t number here		······	\$
rt 8:	List the To	tals of Each Part of	this Form				
Part 1: To	otal real estat	e, line 2				<b>~</b>	<u>\$120,000.00</u>
Part 2: To	otal vehicles,	line 5		\$16,442.00			
Part 3: To	otal personal	and household items, line	15	\$ <u>1,450.00</u>			
Part 4: To	tal financial	assets, line 36		\$2,040.00			
Part 5: To	tal business	related property, line 45		\$250.00			
Part 6: To	otal farm- and	fishing-related property, I	ine 52	\$0.00			
Part 7: To	otal other pro	perty not listed, line 54		+\$0.00	_		
Total pers	sonal propert	y. Add lines 56 through 61		\$20,182.00	Copy personal p	property total	+\$ <u>20,182.00</u>
Total of a	ll property or	Schedule A/B. Add line 55	+ line 62				\$ <u>140,182.00</u>

# Attachment Debtor: Eugene R. Behrens Case No:

#### Attachment 1

Wells Fargo (P.O. Box 10335, Des Moines, Iowa 50306-0368) of part of the South West 1/4 of Section 17, Township 34 North Range 11, east of the third principal Meridian, in Will County, Illinois

Debtor 1  Gene First Name Debtor 2 Spouse, if filing)  First Name	n to identify your case:	Document	Page 20 of 59	
First Name	Б			
Debtor 2	R.	Behrens		
	Middle Name	Last Name		
	Middle Name	Last Name		
nited States Bankruptcy	y Court for the: Northern D	District of Illinois		
ase number (known)				Check if this is a amended filing
fficial Form	106C			
chedule	C: The Pro	perty You	Claim as Exemp	<b>t</b> 04/16
ing the property you I ace is needed, fill out ur name and case nu	listed on Schedule A/B: Prost and attach to this page as imber (if known).	operty (Official Form 106A many copies of Part 2: A	gether, both are equally responsible for VB) as your source, list the property tha dditional Page as necessary. On the together the exemption you claim.	t you claim as exempt. If more o of any additional pages, write
any applicable statu irement funds—may	utory limit. Some exempti y be unlimited in dollar a	ions—such as those for mount. However, if you	fair market value of the property being health aids, rights to receive certain claim an exemption of 100% of fair may property is determined to exceed that	benefits, and tax-exempt arket value under a law that
	e applicable statutory am the Property You Clair			
interior .				
. Which set of exen	notions are you claiming	Check one only even if	the second of the second	
	ng state and federal nonba	nkruptcy exemptions. 11		
		nkruptcy exemptions. 11		
☐ You are claiming	ng state and federal nonba ng federal exemptions. 11	nkruptcy exemptions. 11 U.S.C. § 522(b)(2)		
You are claiming For any property y	ng state and federal nonba ng federal exemptions. 11	nkruptcy exemptions. 11 U.S.C. § 522(b)(2) that you claim as exem	U.S.C. § 522(b)(3)	Specific laws that allow exemption
You are claiming For any property y	ng state and federal nonba ng federal exemptions. 11 you list on Schedule A/B of the property and line on	nkruptcy exemptions. 11 U.S.C. § 522(b)(2)  that you claim as exem  Current value of the	U.S.C. § 522(b)(3)  pt, fill in the information below.	
For any property y  Brief description Schedule A/B that	ng state and federal nonba ng federal exemptions. 11 you list on Schedule A/B of the property and line on	that you claim as exem  Current value of the portion you own Copy the value from	U.S.C. § 522(b)(3)  pt, fill in the information below.  Amount of the exemption you claim  Check only one box for each exemption	735 ILCS 5/12-901
For any property y  Brief description Schedule A/B that  Brief description:	ng state and federal nonbang federal exemptions. 11  you list on Schedule A/B  of the property and line on this this property	that you claim as exem  Current value of the portion you own  Copy the value from Schedule A/B	U.S.C. § 522(b)(3)  pt, fill in the information below.  Amount of the exemption you claim	
For any property y  Brief description Schedule A/B that  Brief description: Line from Schedule A/B: 1	ng state and federal nonbaing federal exemptions. 11  you list on Schedule A/B  of the property and line on it lists this property	that you claim as exem  Current value of the portion you own  Copy the value from Schedule A/B	pt, fill in the information below.  Amount of the exemption you claim  Check only one box for each exemption	735 ILCS 5/12-901
For any property y  Brief description Schedule A/B that  Brief description: Line from Schedule A/B:  Brief description: Schedule A/B:  Brief description: Schedule A/B: Sc	ng state and federal nonbaing federal exemptions. 11  you list on Schedule A/B  of the property and line on the lists this property  See Attachment 1	that you claim as exem  Current value of the portion you own  Copy the value from Schedule A/B  \$ 120,000.00	pt, fill in the information below.  Amount of the exemption you claim  Check only one box for each exemption	735 ILCS 5/12-901 735 ILCS 5/12-1001(b)
For any property y  Brief description Schedule A/B that  Brief description: Line from Schedule A/B:  Brief description: Line from Schedule A/B:  Brief description: Line from 1	ng state and federal nonbaing federal exemptions. 11  you list on Schedule A/B  of the property and line on the lists this property  See Attachment 1	that you claim as exem  Current value of the portion you own  Copy the value from Schedule A/B  \$ 120,000.00	U.S.C. § 522(b)(3)  pt, fill in the information below.  Amount of the exemption you claim  Check only one box for each exemption	735 ILCS 5/12-901 735 ILCS 5/12-1001(b)

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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Attachment
Debtor: Gene R. Behrens Case No:

#### Attachment 1

Unit 33 in Fairview condos Association No. 2 of Lot 17 in Fairview subdivision, being a Subdivision of part of the South West 1/4 of Section 17, Township 34 North Range 11, east of the third principal Meridian, in Will County, Illinois

#### Attachment 2

Checking Account with First Bank of Manhattan

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	Document	Page 22 of 59			
Fill in this information to identify your case	21				
Debtor 1 Gene R. Behrens					
Debtor 1 Gene R. Benrens  First Name Middle Na	ame Last Name				
Debtor 2 (Spouse, if filing) First Name Middle Na	ame Last Name				
United States Bankruptcy Court for the: Norther	n District of Illinois				
	TO TO THE TOTAL OF				
(If known)				☐ Check if	this is an
				amende	d filing
Official Form 106D					
Schedule D: Creditors	s Who Have C	laims Secure	d by Prop	erty	12/15
Be as complete and accurate as possible. Information. If more space is needed, copy additional pages, write your name and case.  1. Do any creditors have claims secured I No. Check this box and submit this for Yes. Fill in all of the information below	the Additional Page, fill it on the number (if known).  by your property?  m to the court with your othe	out, number the entries, an	d attach it to this	form. On the top of a	any
Part 1: List All Secured Claims			O-1 A	Calumn B	Column C
List all secured claims. If a creditor has a for each claim. If more than one creditor has much as possible, list the claims in alp	has a particular claim, list the	other creditors in Part 2.	Amount of claim Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Unsecured portion
2.1 Ally	Describe the property that	t secures the claim:	\$ 19,484.64	\$_16,442.00	\$ 3,042.64
Creditor's Name P.O. Box 380901 Number Street	2G1FF1E38F914848	5			
	As of the date you file, the	claim is: Check all that apply.			
Bloomington MN 55438	Contingent				
Bloomington MN 55438 City State ZIP Code	Unliquidated Disputed				
Who owes the debt? Check one.	Nature of lien. Check all tha	it apply.			
Debtor 1 only		(such as mortgage or secured			
Debtor 2 only	car loan)  Statutory lien (such as tax				
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Judgment lien from a law				
Check if this claim relates to a community debt	Other (including a right to	offset)	-		
Date debt was incurred	Last 4 digits of account n	umber 1 3 0 4			
Ally	Describe the property tha	t secures the claim:	\$21,099.54	\$ 16,732.00	\$ 4,367.54
Creditor's Name	2014 Chevrolet Expr	ess			
P.O. Box 380901	-				
	As of the date you file, the	e claim is: Check all that apply.			
	Contingent				
Bloomington MN 55438 City State ZIP Code	Unliquidated ☐ Disputed				
Who owes the debt? Check one.		at apply			
Debtor 1 only	Nature of lien. Check all tha	(such as mortgage or secured			
Debtor 2 only	car loan)	(audit as mortgage of Secured			
Debtor 1 and Debtor 2 only	Statutory lien (such as ta				
At least one of the debtors and another	Judgment lien from a law Other (including a right to				

☐ Check if this claim relates to a

community debt

Date debt was incurred 2014

Last 4 digits of account number 1 9 9 6

Add the dollar value of your entries in Column A on this page. Write that number here:

\$40,584.18

Case 17-31206 Doc  Gene R. Behrens First Name Middle Name	Document Page 23 of 59		Desc Main	
Additional Page	age, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
Banc Of America Leasing & Capital, LLC Creditor's Name 135 N. La Salle Street Number Street	Describe the property that secures the claim:	\$ 115,000.00	\$ Unknown	\$
Chicago IL 60603 City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent  Unliquidated Disputed			
Who owes the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt	Nature of iien. Check all that apply.  ☐ An agreement you made (such as mortgage or secured car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) See Attachment 1			
Date debt was incurred October 19, 2014	Last 4 digits of account number			
See Attachment 2 Creditor's Name	Describe the property that secures the claim:	s 101,191.71	\$ 120,000.00	\$
P.O. Box 10335 Number Street	Unit 33 in Fairview condos Association No. 2 of Lot 17 See Attachment 2			
Des Moines IA See City State ZIP Code Who owes the debt? Check one.	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed			
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt	Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 3 1 6 9			
25	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name  Number Street				
City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed			
Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a	Nature of lien. Check all that apply.  ☐ An agreement you made (such as mortgage or secured car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
community debt				

Add the dollar value of your entries in Column A on this page. Write that number here: \$216,191.71 If this is the last page of your form, add the dollar value totals from all pages.

Last 4 digits of account number

\$ 256,775.89

Date debt was incurred

Write that number here:

# Attachment Debtor: Gene R. Behrens Case No:

#### Attachment 1

Grant of security interest in and to any and all rights acquired by Borrower (GenoB Snacks Inc.) under its agreement with S-L Distribution company, Inc. Debtor is a guarantor.

#### Attachment 2

Wells Fargo (P.O. Box 10335, Des Moines, Iowa 50306-0368) 50306-0368

in Fairview subdivision, being a Subdivision of part of the South West 1/4 of Section 17, Township 34 North Range 11, east of the third principal Meridian, in Will County, Illinois

Case 17-31206 Doc 1 Filed 10/18/17 Entered 10/18/17 13:58:59 Desc Main Fill in this information to identify your case: Gene R. Behrens Debtor 1 Middle Name First Name Debtor 2 (Spouse, if filing) First Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an amended filing (If known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). **List All of Your PRIORITY Unsecured Claims** Part 1: 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. 2.List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim **Priority** Nonpriority amount amount Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply Contingent ZIP Code Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated is the claim subject to offset? Other. Specify ☐ No ☐ Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply Contingent 7IP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only ■ Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were ☐ Check if this claim is for a community debt intoxicated Is the claim subject to offset? Other, Specify ☐ No Yes

Debtor 1

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Part 2:

**List All of Your NONPRIORITY Unsecured Claims** 

3.	Do any creditors have nonpriority unsecured claims against you?  No. You have nothing to report in this part. Submit this form to the Yes						
	List all of your nonpriority unsecured claims in the alphabetical or priority unsecured claim, list the creditor separately for each claim. For included in Part 1. If more than one creditor holds a particular claim, lis fill out the Continuation Page of Part 2.	each claim listed, identify what type of claim it is. Do not list	claims already				
			Total claim				
4.1	Bank of America Nonpriority Creditor's Name	Last 4 digits of account number 0 8 3 1	\$8,047.63				
	P.O. Box 15026 Number Street	When was the debt incurred? Ongoing					
	Wilmington DE 19850-5026 City State ZIP Code	As of the date you file, the claim is: Check all that apply.					
	Who incurred the debt? Check one.  Debtor 1 only	☐ Contingent ☑ Unliquidated ☐ Disputed					
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  Student loans					
	☐ Check if this claim is for a community debt  Is the claim subject to offset?  ☑ No	<ul> <li>□ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> <li>☑ Other. Specify</li> </ul>					
	Yes	Content Specify					
4.2	Best Buy Credit Services  Nonpriority Creditor's Name	Last 4 digits of account number 9 4 0 5 When was the debt incurred? Ongoing	<u>\$ 128.20</u>				
	PO Box 790441						
	St. Louis 63179 City State ZIP Code	As of the date you file, the claim is: Check all that apply.					
	City State ZIP Code  Who incurred the debt? Check one.	☐ Contingent ☐ Unliquidated					
	☐ Debtor 1 only ☐ Debtor 2 only	Disputed					
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:					
	At least one of the debtors and another  Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	Is the claim subject to offset?  ☑ No ☑ Yes	Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card Charges					
4.3	Chase Nonpriority Creditor's Name	Last 4 digits of account number 3 2 4 5  When was the debt incurred? Ongoing	s_12,565.02				
	Attention: Bankruptcy Department, 800 Brooksedge Blvd.  Number Street	Then was the dest mounted.					
	Westerville OH 43801 City State ZIP Code	As of the date you file, the claim is: Check all that apply.					
	Who incurred the debt? Check one.  Debtor 1 only	☐ Contingent ☐ Unliquidated ☐ Disputed					
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:					
	☐ At least one of the debtors and another	Student loans					
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce					
	Is the claim subject to offset?  ☑ No ☐ Yes	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card Charges					

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isting any entries on this page, number them beginning with	4.5, followed by 4.6, and so forth.	Total claim
Comenity Bank	Last 4 digits of account number 9 6 4 0	\$ <u>7,865.80</u>
590 E. Broad St.	When was the debt incurred? Ongoing	
imber Street	As of the date you file, the claim is: Check all that apply.	
Columbus OH 43213	Contingent	
y Said En Sod	☑ Unliquidated	
ho incurred the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?	Other. Specify Credit Card Charges	
l No		
l Yes		
Ohls Department Stores	Last 4 digits of account number 3 8 9	\$ 342.34
onpriority Creditor's Name	When was the debt incurred? Ongoing	
156 W 17000 Ridgewood Dr.	Trigorny Ongoing	
Imber Street Menomonee Falls WI 53051	As of the date you file, the claim is: Check all that apply.	
ty State ZIP Code	☐ Contingent	
	☑ Unliquidated	
ho incurred the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?	Other. Specify Credit Card Charges	
l No		
Yes		
		\$ 16,429.0
IAVIENT	Last 4 digits of account number 4 4 6 1	
onpriority Creditor's Name	When was the debt incurred?	
O Box 9500	-	
Vilks Barre PA 18773-9500	As of the date you file, the claim is: Check all that apply.	
y State ZIP Code	Contingent	
the insured the delay of	☑ Unliquidated	
ho incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Torre of MONDBIODITY	
Debtor 2 only  Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	☑ Student loans	
	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
the claim subject to offset?	Other. Specify	
No		

Debtor 1

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6.	Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §15	9.
	Add the amounts for each type of unsecured claim.	

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$0.00	
from Part 1	6b. Taxes and certain other debts you owe the government		\$0.00	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$0.00	_
	6e. <b>Total.</b> Add lines 6a through 6d.	6e.	\$0.00	
			Total claim	
Total claims	6f. Student loans	6f.	\$ 16,429.09	
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00	
	<ol> <li>Other. Add all other nonpriority unsecured claims.</li> <li>Write that amount here.</li> </ol>	6i.	+ \$28,948.99	
	6j. <b>Total.</b> Add lines 6f through 6i.	6j.	\$ <u>45,378.08</u>	

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	Variation in	No. of the last						
Fil	l in this in	formation to id	lentify your c	ase:				
De	btor	Gene R. Behre		lle Name La	ast Name	_		
	btor 2		A SECTION ASSESSMENT OF THE PERSON ASSESSMENT					
	ouse If filing)				st Name			
Ųn	ited States E	Bankruptcy Court	for the: Nortner	n District of Illinois				
	se number known)							☐ Check if this is ar
,								amended filing
Of	ficial F	orm 106	G					
Sc	hedu	ıle G: E	xecuto	ory Contrac	ts and U	nexpired	Leases	12/15
_				. If two married peopl				supplying correct
				by the additional page				
add	itional pag	ges, write your	name and ca	se number (if known)	·			
1	Do you h	ave any evecu	tory contract	s or unexpired leases	:7			
1.	-		-	n with the court with yo		You have nothing	else to report on this	s form.
				ow even if the contract				
2.	List sepa	rately each per	rson or comp	any with whom you h	ave the contract	or lease. Then sta	te what each contra	act or lease is for (for
	example, unexpired		ease, cell pho	one). See the instructio	ns for this form in t	he instruction book	let for more example	es of executory contracts and
	Person o	r company wit	h whom you	have the contract or I	ease	State what th	e contract or lease	is for
2.1								
	Name							
	Number	Street						
	City		State	ZIP Code				
2.2								
	Name				-			
	Number	Chroni						
	Number	Street						
	City		State	ZIP Code				
2.3								
	Name							
	Number	Street						
	City		State	ZIP Code				
2.4								
	Name							
	Number	Street						
	City		Chata	7ID Code				
2 =	77. 2022 11		State	ZIP Code				
2.5	Name							
	Hallie							
	Number	Street						
	City		State	ZIP Code				
	Oity		Oldio					

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Fill in this information to identify your case:	
Cone P. Rehrens	
Debtor 1 Gene R. Behrens First Name Middle Name Last Name	
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: Northern District of Illinois	
Case number	
(If known)	☐ Check if this is an
	amended filing
Official Form 106H	
Schedule H: Your Codebtors	12/15
Codebtors are people or entities who are also liable for any debts you may have. Be are filing together, both are equally responsible for supplying correct information. If and number the entries in the boxes on the left. Attach the Additional Page to this page to the page number (if known). Answer every question.  1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse   No	more space is needed, copy the Additional Page, fill it out, age. On the top of any Additional Pages, write your name and
¥ Yes	
<ol> <li>Within the last 8 years, have you lived in a community property state or territory Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Wa</li> </ol>	
■ No. Go to line 3.	
Yes. Did your spouse, former spouse, or legal equivalent live with you at the time	9?
□ No	
Yes. In which community state or territory did you live?	Fill in the name and current address of that person.
Name of your spouse, former spouse, or legal equivalent	-
Harris of your speaker, former speaker, or rogal oquiralent	
Number Street	-
City State ZIP Code	_
<ol> <li>In Column 1, list all of your codebtors. Do not include your spouse as a codebtor shown in line 2 again as a codebtor only if that person is a guarantor or cosign Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule Schedule E/F, or Schedule G to fill out Column 2.</li> </ol>	er. Make sure you have listed the creditor on
Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
	Check all schedules that apply:
GenoB Snacks, Inc.	Schedule D, line 2.2, 2.3
Name	Schedule E/F, line
495 Fairview Dr. Number Street	☐ Schedule G, line
Manhattan         IL         60442           City         State         ZIP Code	
3.2	
Name	Schedule D, line
	☐ Schedule E/F, line
Number Street	☐ Schedule G, line
City State ZIP Code	
3.3	Schedule D, line
Name	Schedule E/F, line
Number Street	Schedule G, line
	Suited St. Mile
City State ZIP Code	

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Fill in this information to identify yo	our case:				
Debtor 1 Gene R. Behrens					
First Name Debtor 2	Middle Name	Last Name			
(Spouse, if filing) First Name		Last Name			
United States Bankruptcy Court for the:	Northern District of Illinois			-	
Case number (If known)				Check if t	
					nended filing plement showing post-petition
					er 13 income as of the following date:
Official Form 106I				MM / E	DD / YYYY
Schedule I: You	rIncome				12/15
supplying correct information. If you	are married and not filin e is not filing with you, d op of any additional page	ig jointly, and you o not include info	ır spo	ouse is living with	or 2), both are equally responsible for you, include information about your spouse. use. If more space is needed, attach a known). Answer every question.
<ol> <li>Fill in your employment information.</li> </ol>		Debtor 1	- 1		Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status		red		☐ Employed ☐ Not employed
Include part-time, seasonal, or self-employed work.		Letter corrier			
Occupation may Include student or homemaker, if it applies.	Occupation	Letter carrier			
	Employer's name	United States P	ostal	Service	
	Employer's address	21201 S. Elsner Number Street	Road	ı	Number Street
		Frankfort, IL 604	123		
		City	Stat	te ZIP Code	City State ZIP Code
	How long employed the	re? 2 weeks			
Part 2: Give Details About	Monthly Income				
Estimate monthly income as of spouse unless you are separated. If you or your non-filing spouse habelow. If you need more space, at	ive more than one employe	er, combine the info			write \$0 in the space. Include your non-filing for that person on the lines
				For Debtor 1	For Debtor 2 or non-filing spouse
<ol><li>List monthly gross wages, sala deductions). If not paid monthly,</li></ol>			2.	\$ 3,033.33	\$ 0.00
3. Estimate and list monthly over	time pay.		3.	+\$ 0.00	+ \$_0.00
4. Calculate gross income. Add lin	ne 2 + line 3.		4.	\$_3,033.33	\$_0.00

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Gene R. Behrens Debtor 1 Case number (If known) Middle Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here \$ 3,033.33 \$ 0.00 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions \$ 758.33 \$ 0.00 5a. \$ 0.00 \$ 0.00 5b. Mandatory contributions for retirement plans 5b. 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 5d. Required repayments of retirement fund loans \$ 0.00 \$ 0.00 5d. 5e. Insurance 5e. \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 5f. Domestic support obligations 5f \$ 0.00 \$ 0.00 5g. Union dues 5q. +\$ 0.00 \$ 0.00 5h. Other deductions. Specify: 5h. 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 6. \$ 0.00 \$ 758.33 \$ 2,275.00 \$ 0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$ 0.00 \$ 0.00 monthly net income. 8a. 8b. Interest and dividends 8b. \$ 0.00 \$ 0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce \$ 0.00 \$ 0.00 settlement, and property settlement. 8c. \$ 0.00 \$ 0.00 8d. Unemployment compensation 8d. 8e. Social Security 8e. \$ 0.00 \$ 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental \$ 0.00 Nutrition Assistance Program) or housing subsidies. Specify: 8f. 8g. Pension or retirement income \$ 0.00 8g. \$ 0.00 +\$ 0.00 8h. Other monthly income. Specify: 8h. 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. \$ 0.00 9. \$ 0.00 10. Calculate monthly income. Add line 7 + line 9. \$ 2,275.00 \$ 2,275.00 \$ 0.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: none 11. + \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. \$ 2,275.00 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? X No. Yes. Explain:

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emiliar interest of face are	45.4					
Fill in this information to identify	your case:					
Debtor 1 Gene R. Behrens First Name	Middle Name Last Name	Check if th	is is:			
Debtor 2 (Spouse, if filing) First Name	Middle Name Last Name	An ame	ended filing			
United States Bankruptcy Court for the:					petition chapter 13	
Case number			xpenses as of the following date:			
(If known)		MM / DL	) / YYYY			
Official Form 106J						
Schedule J: Yo	ur Expenses				12/15	
	ossible. If two married people are filin ed, attach another sheet to this form.					
Part 1: Describe Your Ho	usehold					
1. Is this a joint case?						
No. Go to line 2.  Yes. Does Debtor 2 live in a	separate household?					
<ul><li>☒ No</li><li>☐ Yes. Debtor 2 must f</li></ul>	ile Official Forms 106J-2, Expenses for	Separate Household of Debtor I	2.			
2. Do you have dependents?	■ No	Dependent's relationship to	De	pendent's	Does dependent live	
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	ag	e	with you?	
Do not state the dependents'					☐ No ☐ Yes	
names.					□ No	
			_		☐ Yes	
					☐ No☐ Yes	
					☐ Yes	
					☐ Yes	
					☐ No	
					Yes	
3. Do your expenses include expenses of people other than yourself and your dependents?	No     Yes					
Part 2: Estimate Your Ongo	oing Monthly Expenses					
Estimate your expenses as of you	ur bankruptcy filing date unless you a unkruptcy is filed. If this is a suppleme					
applicable date.						
	on-cash government assistance if you ed it on Schedule I: Your Income (Offi			Your expe	nses	
4. The rental or home ownership	expenses for your residence. Include		_	\$ 957.00		
any rent for the ground or lot.  If not included in line 4:			4.			
4a. Real estate taxes			4a.	\$ 0.00		
4b. Property, homeowner's, or	renter's insurance			\$ 0.00		
4c. Home maintenance, repair				\$ 20.00		
4d. Homeowner's association				\$ 130.00		

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Debtor 1

Gene R. Behrens
First Name Middle F

rst Name Middle Name Last Name

Case number (if known)\_\_\_\_\_

15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  17e. Other payments you make to support others who do not live with you. Specify: 17d. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses				Your expenses
B. Utilities:   6a. Electricity, heat, natural gas   6a. Electricity, heat, natural gas   6b. Water, sewer, garbage collection   6b. \$0.000     6c. Telephone, cell phone, internet, satellite, and cable services   6c. \$135.00     6d. Other. Specify:	5.	Additional mortgage payments for your residence, such as home equity loans	5	\$ 0.00
6s. Electricity, heat, natural gas 6s. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$135.00 6c. \$135.00 6d. \$0.00 7. Food and housekeeping supplies 7. \$400.00 8. Childcare and children's education costs 8. \$0.00 8. Childcare and children's education costs 9. \$50.00 8. Childcare and children's education costs 9. \$50.00 9. Personal care products and services 10. \$5.00 11. Medical and dental expenses 11. \$60.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. Enterfainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15s. Life insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Other insurance. Specify. 15d. \$0.00 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 8pecify. 17a. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify. 17d. Other. Specify			0.	
6. Water, sewer, garbage collection 6. Telephone, cell phone, Internet, satellite, and cable services 6. Other. Specify: 7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, faundry, and dry cleaning 10. Personal care products and services 11. Medical and dental expenses 12. Transportation, Include gas, maintenance, bus or train fare. 12. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. 16. Insurance 17. Vehicle insurance deducted from your pay or included in lines 4 or 20. 15s. Life insurance 15s. Vehicle insurance 15s. Vehicle insurance 15s. Vehicle insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15s. Car payments for Vehicle 1 17s. Car payments for Vehicle 2 17c. Other. Specify: 17d. Chier. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 18. Your payments of allmony, maintenance, and support that you did not report as deducted from your pay on line s, Schedule I, Your Income (Official Form 108). 18. Your payments of allmony, maintenance, and support that you did not report as deducted from your pay on line s, Schedule I, Your Income (Official Form 108). 19. Other payments you make to support others who do not live with you. Specify: 20a. Mortgages on other property 20a. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Meintenance, repair, and upkeep expenses 20d. Solono 20d. Meintenance, repair, and upkeep expenses	0.		60	¢ 125 00
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify:  7. Food and housekeeping supplies 7. Cadou. O.				*
8d.   Cither. Specify:				•
7. Food and housekeeping supplies       7. \$400.00         8. Childcare and children's education costs       8. \$0.00         9. Clothing, laundry, and dry cleaning       9. \$50.00         10. Personal care products and services       10. \$5.00         11. Medical and dental expenses       11. \$60.00         12. Transportation, include gas, maintenance, bus or train fare. Do not include car payments.       12. \$200.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13. \$0.00         14. Charitable contributions and religious donations       14. \$0.00         15. Insurance.       Do not include insurance deducted from your pay or included in lines 4 or 20.         15a. Life insurance       15a. \$0.00         15c. Vehicle insurance. Specify:       15d. Other insurance. \$90.00         15c. Vehicle insurance. Specify:       15d. Other insurance. Specify:         15d. Other insurance. Specify:       15d. \$0.00         15c. Vehicle insurance. Specify:       15d. \$0.00         16. \$0.00       \$0.00         17c. Car payments for Vehicle 1       17e. Car payments f				¥
8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$50.00 10. Personal care products and services 11. Medical and dental expenses 11. \$50.00 12. Transportation. Include gas, maintenance, bus or train fare. 13. Con not include car payments. 14. Charitable contributions and religious donations 15. Insurance. 16. Do not include insurance deducted from your pay or included in lines 4 or 20. 16. Health insurance 16. Cherinsurance. 17. Vehicle insurance 18. Contributions and religious donations 18. So 0.00 19. Vehicle insurance 19. Other insurance. 19. Other specify: 19. Installment or lease payments: 19. Car payments for Vehicle 1 19. Car payments for Vehicle 2 19. Other. Specify: 19. Other. Specify: 19. Other. Specify: 19. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). 19. Other payments you make to support others who do not live with you. 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20. Other real property, no movements, or renter's insurance 20. Other real property, no movements, or renter's insurance 20. Maintenance, re	7.			
9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. Medical and dental expenses 11. \$60.00  12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. 15d. Other insurance. 15d. Specify: 16d. \$0.00  17. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 17d. Other payments you make to support others who do not live with you. 17d. Specify: 18d. Specify: 19d. \$0.00  19d. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses				<del></del>
10. Personal care products and services				
11.   Medical and dental expenses   11.   \$60.00       12.   Transportation. Include gas, maintenance, bus or train fare.   12.   \$200.00     13.   Entertainment, clubs, recreation, newspapers, magazines, and books   13.   \$0.00     14.   Charitable contributions and religious donations   14.   \$0.00     15.   Insurance   15a.   \$0.00     15a.   Life insurance   15b.   \$0.00     15b.   Health insurance   15b.   \$0.00     15c.   Vehicle insurance   15c.   \$90.00     15d.   Other insurance. Specify:   15d.   \$0.00     15d.   Other insurance. Specify:   16d.   \$0.00     16.   Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   \$9.00     15c.   Specify:   16d.   \$0.00     16c.   Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   \$0.00     15d.   Car payments for Vehicle 1   17a.   \$405.00     17e.   Car payments for Vehicle 2   17b.   \$0.00     17e.   Other. Specify:   17e.   \$0.00     17e.   Other. Specify:   17e.   \$0.00     17e.   Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).   18.   \$0.00     19.   Other payments you make to support others who do not live with you.   \$9.00     19.   Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.   20a.   \$0.00     20a.   Mortgages on other property   20a.   \$0.00     20b.   Real estate taxes   20b.   \$0.00     20c.   Property, homeowner's, or renter's insurance   20c.   \$0.00     20d.   Meintenance, repair, and upkeep expenses   20d.   \$0.00				-
12.   Transportation, Include gas, maintenance, bus or train fare.				
Do not include car payments.   12.   \$20.00			11.	3_00.00
14. Charitable contributions and religious donations  15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance  15b. Health insurance  15c. Vehicle insurance  15d. Other insurance. Specify:  15d. Other insurance. Specify:  15d. Specify:  16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  16. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i).  18. Specify:  19. Specify:  19. Specify:  19. Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income.  20a. Mortgages on other property  20a. Specify:  20b. Specify:  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses	12.		12.	\$ 200.00
15. Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Other insurance. Specify: 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other payments of allmony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$0.00  19. Other payments you make to support others who do not live with you. Specify: 20. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses	13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$ 0.00
Do not include insurance deducted from your pay or included in lines 4 or 20.   15a. Life insurance   15a. \$ 0.00     15b. Health insurance   15b. \$ 0.00     15c. Vehicle insurance   15c. \$ 90.00     15d. Other insurance. Specify:	14,	Charitable contributions and religious donations	14.	\$ 0.00
15b. Health insurance       15b. \$ 0.00         15c. Vehicle insurance       15c. \$ 90.00         15d. Other insurance. Specify:       15d. \$ 0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:       16. \$ 0.00         17. Installment or lease payments:       17a. \$ 405.00         17b. Car payments for Vehicle 1       17a. \$ 0.00         17c. Other. Specify:       17c. \$ 0.00         17d. Other. Specify:       17d. \$ 0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106i).       18. \$ 0.00         19. Other payments you make to support others who do not live with you.       Specify:       19. \$ 0.00         20a. Mortgages on other property       20a. \$ 0.00         20b. Real estate taxes       20b. \$ 0.00         20c. Property, homeowner's, or renter's insurance       20c. \$ 0.00         20d. Maintenance, repair, and upkeep expenses       20d. \$ 0.00	15.			
15c. Vehicle insurance       15c. \$ 90.00         15d. Other insurance. Specify:       15d. \$ 0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:       16.         17. Installment or lease payments:       16.         17a. Car payments for Vehicle 1       17a. \$ 405.00         17b. Car payments for Vehicle 2       17b. \$ 0.00         17c. Other. Specify:       17c. \$ 17c. \$ 17d. \$		15a. Life insurance	15a.	\$ 0.00
15d. Other insurance. Specify:		15b. Health insurance	15b.	\$ 0.00
Specify:		15c. Vehicle insurance	15c.	\$ 90.00
Specify:		15d. Other insurance. Specify:	15d.	\$ 0.00
Specify:	16	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20		
17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17c. Other. Specify:  17d. Other. Specify:  17d. Other. Specify:  17d. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. Your payments you make to support others who do not live with you.  Specify:  19. \$0.00  19. Other payments you make to support others who do not live with you.  Specify:  20a. Mortgages on other property  20b. Real estate taxes  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses  20d. \$0.00  \$0.00  \$0.00	10.		16.	\$ 0.00
17b. Car payments for Vehicle 2  17c. Other. Specify:	17.	Installment or lease payments:		
17c. Other. Specify:		17a. Car payments for Vehicle 1	17a.	\$ 405.00
17d. Other. Specify:		17b. Car payments for Vehicle 2	17b.	\$ 0.00
17d. Other. Specify:		17c. Other. Specify:	17c.	\$
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  19. \$0.00  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses  20d. \$0.00  20d. \$0.00  20d. \$0.00			17d.	
Other payments you make to support others who do not live with you.  Specify:  19. \$ 0.00  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses  20d. \$ 0.00  20d. \$ 0.00	18.	Your payments of alimony, maintenance, and support that you did not report as deducted from	18.	e 0.00
Specify:				\$ 0.00
20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses  20d. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. \$0.00  20b. \$0.00  20c. \$0.00  20d. \$0.00	19.			
20a. Mortgages on other property  20b. Real estate taxes  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses  20d. \$0.00  20d. \$0.00		Specify:	19.	\$ 0.00
20b. Real estate taxes  20b. \$\frac{0.00}{20c}\$  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses  20d. \$\frac{0.00}{20d}\$	20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ne.	
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$\frac{0.00}{0.00}\$		20a. Mortgages on other property	20a.	\$ 0.00
20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00		20b. Real estate taxes	20b.	\$ 0.00
		20c. Property, homeowner's, or renter's insurance	20c.	\$ 0.00
20e. Homeowner's association or condominium dues 20e. \$ 0.00		20d. Maintenance, repair, and upkeep expenses	20d.	\$ 0.00
		20e. Homeowner's association or condominium dues	20e.	\$ 0.00

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Debtor 1		mber (# known)	
	First Name Middle Name Last Name		
21. Other.	Specify:	21.	+\$ 0.00
22a. A 22b. C	ate your monthly expenses.  Id lines 4 through 21.  In any, from Official Form 106J-2  Id line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  Id line 22a and 22b. The result is your monthly expenses.	22.	\$ 2,637.00 \$
23. Calcula	te your monthly net income.		
23a. C	opy line 12 (your combined monthly income) from Schedule I.	23a.	\$ 2,275.00
23b. C	opy your monthly expenses from line 22 above.	23b.	<b>-</b> \$2,637.00
	ubtract your monthly expenses from your monthly income. he result is your monthly net income.	23c.	\$362.00
For exa	expect an increase or decrease in your expenses within the year after you file this mple, do you expect to finish paying for your car loan within the year or do you expect your payment to increase or decrease because of a modification to the terms of your mortgage.	ur	
Yes.	Explain here:		

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Debtor 1	Gene	R.	Behrens
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court for the:	Northern Distric	t of Illinois

Check if this is an amended filing

12/15

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	Your assets Value of what you own \$ 120,000.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$ <u>20,182.00</u>
1c. Copy line 63, Total of all property on Schedule A/B	\$ 140,182.00
art 2: Summarize Your Liabilities	
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	Your liabilities Amount you owe \$ 256,775.89
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ 0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 45,378.08
Your total liabilities	\$ 302,153.97
art 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$ 2,275.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J	\$ <u>2,637.00</u>

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**Behrens** Debtor 1 Gene Case number (if known) **Answer These Questions for Administrative and Statistical Records** Part 4: 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. X Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$ 3,033.33 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) s 16,429.09 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 + \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) s 16,429.09

9g. Total. Add lines 9a through 9f.

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Fill in this information to identify your case:	rage 30 or 33	
Cone Produ		
Debtor 1 GETTE IX. BENTENS  First Name Middle Name	Last Name	
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name	
United States Bankruptcy Court for the: Northern Dist		
Case number	ist of minors	
(If known)		☐ Check if this is an
		amended filing
		_
Official Form 106Dec		
	dividual Dahtada Sah	a ded a a
Declaration About an In	dividual Deptor's Scho	edules 12/15
If two married people are filing together, both are equal	ly responsible for supplying correct information.	
You must file this form whenever you file bankruptcy se	chedules or amended schedules. Making a false	statement, concealing property, or
obtaining money or property by fraud in connection with	h a bankruptcy case can result in fines up to \$25	0,000, or imprisonment for up to 20
years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.		
Sign Below		
Did you pay or agree to pay someone who is NOT a	attorney to help you fill out bankruptcy forms?	
☑ No	i attornoy to molp you mil out bank aptoy forms :	
Yes. Name of person	Attach Pankruntau Batitian Om	paror's Nation Deplacation and
Tos. Name of person	Attach Bankruptcy Petition Prej Signature (Official Form 119).	parer's Notice, Declaration, and
Under penalty of position, I dealare that I have read to		ALCO COM
Under penalty of perjury, I declare that I have read to that they are true and correct.	te summary and schedules filed with this declara	ation and
	4.5	
X Cen Deline	×	_
Signature of Debtor 1	Signature of Debtor 2	
Pata 10/12/02017	Date	
MM DD / YYYY	Date MM / DD / YYYY	

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Fill in this in	formation to identify y	our case:		
Debtor 1	Gene R. Behrens			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for the: _	Northern	District Of Illinois	
Case number (If known)				☐ Check if this is amended filing

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Hold Secured Claims

For any creditors that you listed in Part 1 of Schedule D: Credit information below.	tors Who Hold Claims Secured by Property (Official	al Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: See Attachment 1	☐ Surrender the property.	☑ No ☐ Yes
Description of property securing debt: Unit 33 in Fairview condos Association No. 2 of Lot 17 in Fairview subdivision, being a Subdivision	<ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>	☐ Yes
See Attachment 1  Creditor's	□ Surrender the property.	⊠ No
name: Ally  Description of property securing debt: 2G1FF1E38F9148485	<ul> <li>□ Retain the property and redeem it.</li> <li>☑ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>	Yes
Creditor's name: Ally	Surrender the property.	ĭ No
Description of property securing debt: 2014 Chevrolet Express	Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.	Yes
Creditor's name: Banc Of America Leasing & Capital, LLC Description of	Retain the property and [explain]:  Surrender the property.  Retain the property and redeem it.	No     Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	

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Your name

Gene R. Behrens
First Name Middle Name

Last Name

Case number (If known)

r any unexpired personal property lease that you listed in <i>Schedule G: Executory Contracts and Unexpired Leases</i> (Official Form 106G) in the information below. Do not list real estate leases. <i>Unexpired leases</i> are leases that are still in effect; the lease period has not yet ded. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).					
Describe your unexpired personal property leases	Will the lease be assumed?				
essor's name;	□ No				
Description of leased property:	Yes				
essor's name:	□ No				
Description of leased property:	Yes				
essor's name:	□ No				
Description of leased roperty:	☐ Yes				
essor's name:	□ No □ Yes				
Description of leased roperty:	Yes				
essor's name:	□ No				
Description of leased roperty:	Yes				
essor's name:	□ No				
Description of leased roperty:	Yes				
essor's name:	□ No				
Description of leased roperty:	Yes				
3: Sign Below					
der penalty of perjury, I declare that I have indicated my intention about any proper	rty of my estate that secures a debt and any				
rsonal property that is subject to an unexpired lease.					

Date \_\_\_\_\_MM / DD / YYYY

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ebtor 1	Gene First Name	R,	Behrens				
ebtor 2	First Name	Middle Name	Last Name				
pouse, if filing		Middle Name	Last Name				
nited States	Bankruptcy Court fo	or the: Northern District of	f Illinois				
ase number known)			<del></del>			☐ Che	eck if this is a
						ame	ended filing
fficial I	Form 107						
		noncial Affai	ro for India	iduals Filing	for Donk		
atem	ent of Fi	IIaliCiai Aliai	15 for mary	iduais Filling	or Banki	uptcy	04
				together, both are equal			
	own). Answer ev		ate sneet to this for	m. On the top of any addit	tional pages, wri	te your name and	d case
ווא וון ושמו	own, Answer C	very question.					
rt 1: 0	Sivo Dotaile Al	oout Your Marital Sta	tue and Whore V	au Lived Refere			
	oive Details AL	Jour Tour Marital Sta	itus anu where 10	ou Lived Before			
16/h = 4 != .	our current mar	ital status?					
what is v							
what is y							
☐ Marri							
_							
☐ Marri							
☐ Marri	narried	ave you lived anywhere	other than where yo	ou live now?			
☐ Marri ☑ Not n  During th ☑ No	narried ne last 3 years, h						
☐ Marri ☑ Not n  During th ☑ No	narried ne last 3 years, h	ave you lived anywhere					
☐ Marri ☐ Not n  During th ☐ No ☐ Yes.	ne last 3 years, h		years. Do not include	where you live now.		D	ntas Dahtar 2
☐ Marri ☑ Not n  During th ☑ No ☐ Yes.	narried ne last 3 years, h						ates Debtor 2 ved there
☐ Marri ☑ Not n  During th ☑ No ☐ Yes.	ne last 3 years, h		years. Do not include	where you live now.  Debtor 2:		liv	ed there
☐ Marri ☑ Not n  During th ☑ No ☐ Yes.	ne last 3 years, h		years. Do not include	where you live now.		liv	ed there
Marri Not n  During th  No  Yes.  Deb	narried  ne last 3 years, h  List all of the place  otor 1:		years. Do not include	where you live now.  Debtor 2:  Same as Debtor 1		liv	ed there
☐ Marri ☑ Not n During th ☑ No ☐ Yes.	ne last 3 years, h		vears. Do not include  Dates Debtor 1  lived there	where you live now.  Debtor 2:		liv	Same as Debto
☐ Marri ☑ Not n During th ☑ No ☐ Yes.	narried  ne last 3 years, h  List all of the place  otor 1:		pears. Do not include  Dates Debtor 1 lived there	where you live now.  Debtor 2:  Same as Debtor 1		liv	yed there
☐ Marri ☑ Not n During th ☑ No ☐ Yes.	narried  ne last 3 years, h  List all of the place  otor 1:		pears. Do not include  Dates Debtor 1 lived there	where you live now.  Debtor 2:  Same as Debtor 1		liv	Same as Debto
Marri Not n  During th  No  Yes.  Deb	ne last 3 years, h List all of the place otor 1:		pears. Do not include  Dates Debtor 1 lived there	where you live now.  Debtor 2:  Same as Debtor 1	State ZIP C	liv	Same as Debto
Marri  Not n  During th  No  Yes.  Nu	ne last 3 years, h List all of the place otor 1:	es you lived in the last 3 y	pears. Do not include  Dates Debtor 1 lived there	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City	State ZIP C	liv	Same as Debto From To
Marri  Not n  During th  No  Yes.  Nu	ne last 3 years, h List all of the place otor 1:	es you lived in the last 3 y	pears. Do not include  Dates Debtor 1 lived there	where you live now.  Debtor 2:  Same as Debtor 1  Number Street	State ZIP C	liv	Same as Debto
Marri Not n  During th  No Pes	ne last 3 years, h List all of the place otor 1:	es you lived in the last 3 y	pears. Do not include  Dates Debtor 1 lived there	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City	State ZIP C	ode	Same as Debto From To Same as Debto
Marri Not n  During th  No Pes	ne last 3 years, h List all of the place otor 1:	es you lived in the last 3 y	Prom	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City	State ZIP C	ode	Same as Debto To Same as Debto
Marri Not n  During th  No Pes	ne last 3 years, h List all of the place otor 1:	es you lived in the last 3 y	Pates Debtor 1 lived there  From To	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City  Same as Debtor 1	State ZIP C	ode	Same as Debto From To Same as Debto
Marri  Not n  During th  No  Yes.  Det	ne last 3 years, h List all of the place otor 1:	es you lived in the last 3 y	Prom	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City  Same as Debtor 1	State ZIP C	ode	Same as Debto  From To  Same as Debto
Marri Not n  During th  No Yes.  Det	ne last 3 years, h List all of the place otor 1:	ses you lived in the last 3 y	Prom	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City  Same as Debtor 1  Number Street		ode	Same as Debto  From To  Same as Debto
Marri  Not n  During th  No  Yes.  Det	ne last 3 years, h List all of the place otor 1:	es you lived in the last 3 y	Prom	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City  Same as Debtor 1		ode	Same as Debto From To Same as Debto From

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Gene R. Behrens Debtor 1 Case number (if known) Part 2: **Explain the Sources of Your Income** 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income **Gross income** Sources of income **Gross income** (before deductions and Check all that apply. Check all that apply. (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, From January 1 of current year until \$ 15,000.00 bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, ■ Wages, commissions, For last calendar year: \$ 14,093.00 bonuses, tips bonuses, tips (January 1 to December 31, 2016 Operating a business Operating a business Wages, commissions, Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips \$ 10,612.00 (January 1 to December 31, 2015 Operating a business Operating a business 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. X No Yes, Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Gross income from Sources of income each source each source Describe below. Describe below. (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31,

For the calendar year before that:
(January 1 to December 31,

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	_	ь.			4	
L	е	D	Ю	r	т.	

Gene R. Behrens

First Name Middle Name Lest Name

Case number (if known)

Are eith	her De	ebtor 1's or Debt	tor 2's deb	ts primarily co	onsumer debt	5?		
☐ No.	Neit "incl	ther Debtor 1 no urred by an indivi	r Debtor 2 dual primar	has primarily ily for a persor	consumer del nal, family, or he	ots. Consumer debts ar ousehold purpose."	re defined in 11 U.S.C. § 101	I(8) as
	Duri	ing the 90 days b	efore you fi	led for bankrup	otcy, did you pa	y any creditor a total of	\$6,425* or more?	
		No. Go to line 7.						
		total amount	t you paid th	hat creditor. Do	not include pa		or more payments and the upport obligations, such as this bankruptcy case.	
	* Su	bject to adjustme	ent on 4/01/	19 and every 3	years after that	at for cases filed on or a	after the date of adjustment.	
X Yes	s. Deb	tor 1 or Debtor 2	2 or both h	ave primarily	consumer del	ots.		
						y any creditor a total of	\$600 or more?	
	X	No. Go to line 7.						
		Ves List helow e	ach credito	r to whom you	naid a total of	6000 or more and the to	otal amount you paid that	
		creditor. Do	not include	payments for	domestic supp	ort obligations, such as	child support and	
		alimony. Als	o, do not in	clude paymen	ts to an attorne	y for this bankruptcy ca	se.	
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for.
						¢	\$	В
		Creditor's Name				Ψ	Φ	☐ Mortgage ☐ Car
								Car Credit card
								_
		Number Street						Loan rangument
		Number Street						Loan repayment
								Suppliers or vendor
		Number Street  City	State	ZIP Code				_
			State	ZIP Code		e	ę	Suppliers or vendor Other
			State	ZIP Code		\$	\$\$	□ Suppliers or vendor □ Other
		City	State	ZIP Code		\$	\$\$	☐ Suppliers or vendor ☐ Other ☐ Mortgage ☐ Car
		City	State	ZIP Code		\$	\$	□ Suppliers or vendor □ Other □ Mortgage □ Car □ Credit card
		City  Creditor's Name	State	ZIP Code		\$	_ \$	Suppliers or vendor Other  Mortgage Car Credit card Loan repayment
		City  Creditor's Name	State	ZIP Code		\$	_ \$	Suppliers or vendor Other  Mortgage Car Credit card Loan repayment Suppliers or vendor
		City  Creditor's Name	State	ZIP Code		\$	\$\$	Suppliers or vendor Other  Mortgage Car Credit card Loan repayment
		Creditor's Name  Number Street				\$	\$\$	Suppliers or vendor Other  Mortgage Car Credit card Loan repayment Suppliers or vendor
		City  Creditor's Name  Number Street  City				\$\$	\$\$	Suppliers or vendor Other  Mortgage Car Credit card Loan repayment Suppliers or vendor
		Creditor's Name  Number Street				\$\$		Suppliers or vendor Other  Mortgage Car Credit card Loan repayment Suppliers or vendor Other
		City  Creditor's Name  Number Street  City				\$\$		Suppliers or vendor Other  Mortgage Car Credit card Loan repayment Suppliers or vendor Other  Mortgage
		City  Creditor's Name  Number Street  City  Creditor's Name				\$\$		Suppliers or vendor Other  Mortgage Car Credit card Loan repayment Suppliers or vendor Other
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1	Gene R. Behrens			Case number (if known)_	
	First Name Middle Name Last Name				
nside corpoi agent,	n 1 year before you filed for bankruptcy, did yours include your relatives; any general partners; retrations of which you are an officer, director, person, including one for a business you operate as a so as child support and alimony.	latives of any g	peneral partners; pa owner of 20% or n	artnerships of which nore of their voting s	you are a general partner; ecurities; and any managing
	es. List all payments to an insider.				
		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
ĩ	Insider's Name		\$	\$	
ī	Number Street				
	Mulling 20097	Name of the last o			
7	City State ZIP Code				
,	City State ZIP Code				
Ĭ	Insider's Name		\$	\$	
ī	Number Street				
i	Number Street				
	City State ZIP Code				account of a dalat that hampfited
Vithir an ins	City State ZIP Code n 1 year before you filed for bankruptcy, did yo		ayments or transf	er any property on	account of a debt that benefited
Vithir	City State ZIP Code n 1 year before you filed for bankruptcy, did yo		ayments or transf	er any property on	account of a debt that benefited
Withir an instance of the land	City State ZIP Code  n 1 year before you filed for bankruptcy, did you sider? de payments on debts guaranteed or cosigned by		ayments or transf	er any property on	account of a debt that benefited
Withir an instance of the land	City State ZIP Code  n 1 year before you filed for bankruptcy, did you sider? de payments on debts guaranteed or cosigned by	an insider.			
Withir an instance of the land	City State ZIP Code  n 1 year before you filed for bankruptcy, did you sider? de payments on debts guaranteed or cosigned by		ayments or transf Total amount paid		account of a debt that benefited  Reason for this payment Include creditor's name
Withir an instance of the last	City State ZIP Code  n 1 year before you filed for bankruptcy, did you sider? de payments on debts guaranteed or cosigned by	an insider.	Total amount	Amount you still	Reason for this payment
Withir an instance of the last	City State ZIP Code  In 1 year before you filed for bankruptcy, did you sider?  Ide payments on debts guaranteed or cosigned by the state of the sta	an insider.	Total amount	Amount you still	Reason for this payment
Withir Includ	City State ZIP Code  In 1 year before you filed for bankruptcy, did you sider?  Ide payments on debts guaranteed or cosigned by the state of the sta	an insider.	Total amount	Amount you still	Reason for this payment
Withir instance of the second	City State ZIP Code  n 1 year before you filed for bankruptcy, did you sider?  de payments on debts guaranteed or cosigned by  to es. List all payments that benefited an insider.	an insider.	Total amount	Amount you still	Reason for this payment
Withir in the second se	City State ZIP Code  n 1 year before you filed for bankruptcy, did you sider?  de payments on debts guaranteed or cosigned by  to es. List all payments that benefited an insider.	an insider.	Total amount	Amount you still	Reason for this payment
Withir in the second se	City State ZIP Code  In 1 year before you filed for bankruptcy, did you sider?  Ide payments on debts guaranteed or cosigned by lour in the state of	an insider.	Total amount	Amount you still	Reason for this payment
Withir in the interval of the	City State ZIP Code  In 1 year before you filed for bankruptcy, did you sider?  Ide payments on debts guaranteed or cosigned by lour in the state of	an insider.	Total amount paid	Amount you still	Reason for this payment
Withir an ins	City State ZIP Code  In 1 year before you filed for bankruptcy, did you sider?  Ide payments on debts guaranteed or cosigned by loodes. List all payments that benefited an insider.  Insider's Name  Number Street	an insider.	Total amount paid	Amount you still	Reason for this payment

City

ZIP Code

State

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Document Page 45 of 59 Gene R. Behrens Debtor 1 Case number (# known Identify Legal Actions, Repossessions, and Foreclosures Part 4: Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. X No Yes. Fill in the details. Nature of the case Status of the case Court or agency Pending Case title Court Name On appeal Concluded Case number City ZIP Code State Pending Case title\_ Court Name On appeal Concluded Street Case number ZIP Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Date Value of the property 2014 Chevrolet Express, box truck. Voluntary surrender, see also Schedule B Ally 10/16/2017 \$16,732.00 Creditor's Name PO Box 380901 Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. Bloomington MN 55438 Property was attached, seized, or levied. ZIP Code State Describe the property Date Value of the property Creditor's Name

ZIP Code

Property was repossessed.

Property was foreclosed.Property was garnished.

Property was attached, seized, or levied.

Number Street

City

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Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?  No  Describe the action the creditor took  Date action was taken  Describe the action the creditor took  Date action was taken  Amount was taken  Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  No  Yes  List Certain Gifts and Contributions  Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No  You Seats 2iP Code  Person's relationship to you  Gifts with a total value of more than \$600  Describe the gifts  Dates you gave Value the gifts  Dates you gave Value the gifts  Dates you gave Value the gifts  S  Person to Whom You Gave the Gift  Number Street  Namber Street  Person's relationship to you	or 1	Gene R. Behrens	Case number (if id	own)
accounts or refuse to make a payment because you owed a debt?    No   Yes, Fill in the details.   Date action the creditor took   Date action was taken		First Name Middle Name Last N	ame	
accounts or refuse to make a payment because you owed a debt?    No   Yes, Fill in the details.   Date action the creditor took   Date action was taken				
Describe the action the creditor took				tution, set off any amounts from your
Describe the action the creditor took  Date action was taken  Amount was taken  Circellar's Name  Number Street  Date action was taken  S  Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  No  Yes  It 55 List Certain Gifts and Contributions  Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No  Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person?  Dates you gave the gifts  Person to When You Gave the Gift  Number Street  City State ZIP Code  Describe the gifts  Dates you gave the gifts  S  Dates you gave the gifts			duse you owed a dept?	
Describe the action the creditor took  Date action was taken  Amount  Creditor's Name  Number Street  City State ZIP Code  Last 4 digits of account number: XXXX—  Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  No Yes  It 51 List Certain Gifts and Contributions  Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No Yes, Fill in the details for each gift.  Gifts with a total value of more than \$600 per person?  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Describe the gifts  Dates you gave the gifts  \$  S  City State ZIP Code  Person's relationship to you  Describe the gifts  Dates you gave the gifts  \$  Number Street  City State ZIP Code  S  S  City State ZIP Code  S  S  City State ZIP Code  S  S  City State ZIP Code				
Chy State ZIP Code  Last 4 digits of account number: XXXX		es. I m in the details.		
City Susta ZIP Code  Last 4 digits of account number: XXXX—  Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  No Yes  **T 5:** List Certain Gifts and Contributions**  Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person?  Describe the gifts  Dates you gave the gifts  S  City State ZIP Code  Describe the gifts  Dates you gave the gifts  \$  City State ZIP Code  Same ZIP Code  S  City State ZIP Code  City State ZIP Code  S  City State ZIP Code  City State ZiP Code			Describe the action the creditor took	
Number Street  City State ZIP Code Last 4 digits of account number; XXXX	Cr	reditor's Name		was taken
Number Street  City State ZIP Code Last 4 digits of account number: XXXXX—  Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  No Yes  It is Certain Gifts and Contributions  Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No Yes, Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Describe the gifts  Dates you gave the gift  S  Gifts with a total value of more than \$600 per person  Describe the gifts  Dates you gave the gift  S  Gifts with a total value of more than \$600 per person  Describe the gifts  S  City State ZIP Code  Person's relationship to you  Describe the gifts  Dates you gave the gift  S  City State ZIP Code  Person to Whom You Gave the Gift  Number: Street  S  City State ZIP Code  S  City State ZIP Code  S  City State ZIP Code				
Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  No Yes  Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 Describe the gifts  Dates you gave the gifts  Number Streat  Gifts with a total value of more than \$600 Describe the gifts  Dates you gave the gifts  S	Nu	umber Street		\$
Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  No Yes  It St List Certain Gifts and Contributions  Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person?  Describe the gifts  Dates you gave the gifts  S				
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Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  No Yes  Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No Yes, Fill in the details for each gift.  Gifts with a total value of more than \$600 Describe the gifts  Dates you gave the gifts  Number Street  Gifts with a total value of more than \$600 Describe the gifts  Dates you gave the gift  S	Cit	tv State 7IP Code	Last 4 digits of account number: YYYY	
creditors, a court-appointed receiver, a custodian, or another official?    No		,	East 4 digits of account fulfillogs, 70700-	_
creditors, a court-appointed receiver, a custodian, or another official?    No	Withi	n 1 year before you filed for bankruptc	v. was any of your property in the possession of an as	signee for the benefit of
Urt 5: List Certain Gifts and Contributions  Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Describe the gifts  Dates you gave the gifts  Number Street  City State ZiP Code  Person's relationship to you  Person to Whom You Gave the Gift  Number Street  Dates you gave the gifts  S				•
Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Describe the gifts  Dates you gave the gifts  Person to Whom You Gave the Gift  Number Street  Dates you gave the gifts  S  Gifts with a total value of more than \$600 per person  Describe the gifts  Dates you gave the gifts  S  S  Number Street  Dates you gave the gifts  Number Street  Dates you gave the gifts  Number Street  S  City State ZIP Code  Person to Whom You Gave the Gift  Number Street	× N	o		
Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600  Describe the gifts  Dates you gave the gifts  Person to Whom You Gave the Cilt  Number Street  Describe the gifts  Dates you gave the gifts  S  Gifts with a total value of more than \$600  Describe the gifts  Dates you gave the gifts  S  S  Dates you gave the gifts  S  Cily State ZIP Code  Person to Whom You Gave the Gift  Number Street  Cily State ZIP Code  S  Cily State ZIP Code	U Y	es		
Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 Describe the gifts  Dates you gave the gifts  Person to Whom You Gave the Gift  Number: Street  Describe the gifts  Dates you gave the gifts  S  Gifts with a total value of more than \$600 per person  Describe the gifts  Dates you gave the gifts  S  S  City State ZIP Code  Person's relationship to you  Describe the gifts  Dates you gave the gifts  S  Number: Street  Number: Street  S  City State ZIP Code				
☑ No       Yes. Fill in the details for each gift.         Gifts with a total value of more than \$600 per person       Describe the gifts         Person to Whom You Gave the Gift       \$	irt 5:	List Certain Gifts and Contribut	ions	
Person to Whom You Gave the Gift    Number Street   S	(	Gifts with a total value of more than \$600	Describe the gifts	
Person to Whom You Gave the Gift    Number Street   S				
Person to Whom You Gave the Gift    Number Street   S				\$
City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Describe the gifts  Dates you gave the gifts  Person to Whom You Gave the Gift  Number Street  S	Pe	erson to Whom You Gave the Gift		
City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Describe the gifts person to Whom You Gave the Gift  Number Street  City State ZIP Code				\$
Person's relationship to you  Gifts with a total value of more than \$600 per person  Describe the gifts  Dates you gave the gifts  Person to Whom You Gave the Gift  Number Street  City State ZIP Code	N	umber Street		·
Person's relationship to you  Gifts with a total value of more than \$600 per person  Describe the gifts  Dates you gave the gifts  Person to Whom You Gave the Gift  Number Street  City State ZIP Code	_			
Gifts with a total value of more than \$600 per person  Describe the gifts  Dates you gave the gifts  Person to Whom You Gave the Gift  Number Street  City State ZIP Code				
Gifts with a total value of more than \$600 per person  Describe the gifts  Dates you gave the gifts  Person to Whom You Gave the Gift  Number Street  City State ZIP Code	Cit	ty State ZIP Code		
Gifts with a total value of more than \$600 per person  Describe the gifts  Dates you gave the gifts  Person to Whom You Gave the Gift  Number Street  State ZIP Code	Pe	erson's relationship to you		
Person to Whom You Gave the Gift  Number Street  City State ZIP Code	-6	order a relation strip to you		
Person to Whom You Gave the Gift  Number Street  City State ZIP Code			Describe the gifts	Dates you gave Value
Number Street  City State ZIP Code	pe	er person		the gifts
Number Street  City State ZIP Code				
City State ZIP Code	Pe	erson to Whom You Gave the Gift		<u> </u>
City State ZIP Code				
	N	umber Street		
	_			
Person's relationship to you	Cit	ty State ZIP Code		
	Pe	erson's relationship to you		

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	Gene R. Behrens	Case nun	nber (if known)	
	First Name Middle Name Last N	Name		
Within	1 2 years before you filed for bankrupt	cy, did you give any gifts or contributions with a	a total value of more than \$600	0 to any charity?
≥ No				
☐ Ye	es. Fill in the details for each gift or contr	ibution.		
	Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
_				\$
Cha	narity's Name			•
Nu	umber Street			\$
-				
City	ty State ZIP Code			
0.1,	,, 52.6			
art 6:	List Certain Losses			
	<u> </u>			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss  Include the amount that insurance has paid. List pendir	Date of your loss ng insurance	Value of property lost
		claims on line 33 of Schedule A/B: Property.		1001
		claims on line 33 of Schedule A/B: Property.		\$
				\$
ort 7:	List Certain Payments or Trans			\$
Within	n 1 year before you filed for bankruptoulted about seeking bankruptcy or pre	sfers cy, did you or anyone else acting on your behalf		\$
Withir consu	n 1 year before you filed for bankrupto ulted about seeking bankruptoy or pre de any attorneys, bankruptoy petition pre	efers cy, did you or anyone else acting on your behalf eparing a bankruptcy petition?		\$
Within consultation included No.	n 1 year before you filed for bankruptoulted about seeking bankruptoy or prede any attorneys, bankruptoy petition prede	efers cy, did you or anyone else acting on your behalf eparing a bankruptcy petition?		so anyone you  Amount of payment
Within consult Include No.	n 1 year before you filed for bankruptoulted about seeking bankruptoy or prede any attorneys, bankruptoy petition predes. Fill in the details.  Sbertoli Law Office	ey, did you or anyone else acting on your behalf paring a bankruptcy petition? parers, or credit counseling agencies for services re	equired in your bankruptcy.  Date payment or	so anyone you  Amount of payment
Within consult include	n 1 year before you filed for bankruptoulted about seeking bankruptcy or prede any attorneys, bankruptcy petition predes. Fill in the details.  Sbertoli Law Office Person Who Was Paid P.O. Box 1482  Number Street	ey, did you or anyone else acting on your behalf paring a bankruptcy petition? parers, or credit counseling agencies for services re	equired in your bankruptcy.  Date payment or	so anyone you  Amount of payment
Within consult include	n 1 year before you filed for bankruptoulted about seeking bankruptcy or prede any attorneys, bankruptcy petition predes. Fill in the details.  Sbertoli Law Office Person Who Was Paid P.O. Box 1482	ey, did you or anyone else acting on your behalf paring a bankruptcy petition? parers, or credit counseling agencies for services re	equired in your bankruptcy.  Date payment or	so anyone you  Amount of payment
Include  No Ye  F  N  C  C  C  C  C  C  C  C  C  C  C  C	n 1 year before you filed for bankruptoulted about seeking bankruptcy or prede any attorneys, bankruptcy petition predes. Fill in the details.  Sbertoli Law Office Person Who Was Paid P.O. Box 1482 Number Street  La Grange Park IL 60526	ey, did you or anyone else acting on your behalf paring a bankruptcy petition? parers, or credit counseling agencies for services re	equired in your bankruptcy.  Date payment or	so anyone you  Amount of payment

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1 Gene R. Behrens First Name Middle Name Last	Name	Case number	(R MIDWI)	
	Description and value of any property trans	sferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid				\$
Number Street				\$
City State ZIP Code				
Email or website address	-			
Person Who Made the Payment, if Not You				
romised to help you deal with your credit o not include any payment or transfer that y No Yes. Fill in the details.	tors or to make payments to your credito rou listed on line 16.	rs?		
res. I ill ill die details.	Description and value of any property trans	sferred	Date payment or transfer was made	Amount of payr
Person Who Was Paid				\$
Number Street				\$
				Φ
Vithin 2 years before you filed for bankrup ransferred in the ordinary course of your neclude both outright transfers and transfers to not include gifts and transfers that you had No  Yes. Fill in the details.	business or financial affairs? made as security (such as the granting of a			
		Describe any or debts paid	property or payments received in exchange	Date transfe was made
Person Who Received Transfer				
Number Street				
City State ZIP Code				
City State ZIP Code  Person's relationship to you				
Person's relationship to you				
Person's relationship to you				

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	First Name Middle Name	Last Na	2000	Case number	(if known)	
		Last Na	ame			
Within 1	10 years before you filed	l for bankrup	tcy, did you transfer any propert	y to a self-settled t	rust or similar device of wh	nich you
are a be	eneficiary? (These are of	ten called ass	set-protection devices.)			
No						
☐ Yes	s. Fill in the details.					
						D. 1. 1
			Description and value of the prope	rty transferred		Date transfer was made
Nam	ne of trust					
irt 8: L	List Certain Financial	Accounts,	Instruments, Safe Deposit I	Boxes, and Stora	ige Units	
Within	1 year before you filed for	or bankruptc	y, were any financial accounts o	r instruments held	in your name, or for your b	enefit,
closed,	, sold, moved, or transfe	rred?				
			or other financial accounts; certif			ons,
	age houses, pension fun	ids, cooperat	tives, associations, and other fin	ancial institutions.		
No No						
☐ Yes	s. Fill in the details.					
			Last 4 digits of account number	Type of account or		Last balance befor
				instrument	closed, sold, moved, or transferred	closing or transfer
Na	me of Financial Institution		XXXX	Checking		\$
				Savings		
Nu	ımber Street			Money market		
				,		
_				Brokerage		
Cit	ty State	ZIP Code		☐ Brokerage		
City	ty State	ZIP Code		☐ Brokerage ☐ Other		
Cit	ty State	ZIP Code	VVVV	Other		
	ty State	ZIP Code	xxxx	Other		\$
		ZIP Code	xxxx	Other Checking Savings		\$
Na		ZIP Code	xxxx	OtherChecking Savings Money market		\$
Na	nme of Financial Institution	ZIP Code	XXXX	Other Checking Savings Money market Brokerage		\$
Na	nme of Financial Institution	ZIP Code	xxxx	OtherChecking Savings Money market		\$

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otor 1	Gene R. Behrens		Case number (if known)	
	First Name Middle Name La	st Name		
Have y		or place other than your home within	1 year before you filed for bankruptcy	y?
	es. Fill in the details.			
	s. Fill III the details.	Who else has or had access to it?	Describe the contents	Do you stil
		Trio cise has of had access to it.	Describe the contents	have it?
				□ No
i	Name of Storage Facility	Name		Yes
	The state of the s			Tes les
i	Number Street	Number Street		
		City State ZIP Code		
	City State ZIP Code			
art 9:	Identify Property You Hold	or Control for Someone Else		
2 Do w	au hold or control any property that	compone also owne 2 Include any prop	arty you barrayyad from are storing t	for
-	old in trust for someone.	someone else owns? Include any prop	erty you borrowed from, are storing i	ior,
× N				
☐ Y	es. Fill in the details.			
		Where is the property?	Describe the property	Value
	Owner's Name			c
	Owner a realite			4
	Number Street	Number Street	_	
	Number Street	Number Street		
	Number Street			
	Number Street  City State ZIP Code	Number Street  City State ZIP Co	ode	
	City State ZIP Code	City State ZIP Co	ode	
	City State ZIP Code	City State ZIP Co	ode	
art 10	City State ZIP Code	City State ZIP Co	ode	
art 10	Give Details About Environ purpose of Part 10, the following defi	mental Information initions apply: inte, or local statute or regulation conce	erning pollution, contamination, relea	
art 10 or the p	Give Details About Environmental law means any federal, stardous or toxic substances, wastes, or	mental Information initions apply: ite, or local statute or regulation concert material into the air, land, soil, surfa	erning pollution, contamination, relea ce water, groundwater, or other med	
art 10 or the p Envir	Give Details About Environ  purpose of Part 10, the following defi  ronmental law means any federal, star  rdous or toxic substances, wastes, of  ding statutes or regulations controll	mental Information initions apply: ite, or local statute or regulation concer material into the air, land, soil, surfaing the cleanup of these substances, v	erning pollution, contamination, relea ce water, groundwater, or other med wastes, or material.	ium,
art 10 or the p Envir hazar	Give Details About Environs purpose of Part 10, the following defined and the following defined are toxic substances, wastes, odding statutes or regulations controlled means any location, facility, or proper	mental Information  Initions apply: Inte, or local statute or regulation concer material into the air, land, soil, surfaing the cleanup of these substances, with as defined under any environmental	erning pollution, contamination, relea ce water, groundwater, or other med wastes, or material.	ium,
art 10 or the p Envir hazai inclu Site r it or r	Give Details About Environmental law means any federal, stardous or toxic substances, wastes, oding statutes or regulations controll means any location, facility, or properties of town, operate, or utilize it, income	mental Information  initions apply:  ite, or local statute or regulation concert material into the air, land, soil, surfaing the cleanup of these substances, with the second concert material into the air, land, soil, surfaing the cleanup of these substances, with the cleanup of the cleanup of these substances, with the cleanup of	erning pollution, contamination, relea ce water, groundwater, or other med wastes, or material. al law, whether you now own, operate	ium, e, or utilize
art 10 or the p Envir hazai inclu Site r it or o	Give Details About Environmental law means any federal, stardous or toxic substances, wastes, oding statutes or regulations controll means any location, facility, or proper used to own, operate, or utilize it, incordous material means anything an environmental means anything and environmental means anything an environmental means anything and environmental means	mental Information  Initions apply: Inte, or local statute or regulation concernaterial into the air, land, soil, surfaing the cleanup of these substances, wirty as defined under any environmental luding disposal sites.	erning pollution, contamination, relea ce water, groundwater, or other med wastes, or material. al law, whether you now own, operate	ium, e, or utilize
art 10  Envir hazainclu  Site r it or o	Give Details About Environmental law means any federal, stardous or toxic substances, wastes, oding statutes or regulations controll means any location, facility, or properties to own, operate, or utilize it, incordous material means anything an eletance, hazardous material, pollutant	mental Information  Initions apply: Inte, or local statute or regulation concert material into the air, land, soil, surfaing the cleanup of these substances, with the cleanup of the	erning pollution, contamination, relea ice water, groundwater, or other med wastes, or material. al law, whether you now own, operate ous waste, hazardous substance, toxi	ium, e, or utilize
art 10  Envir hazainclu  Site r it or o	Give Details About Environmental law means any federal, stardous or toxic substances, wastes, oding statutes or regulations controll means any location, facility, or properties to own, operate, or utilize it, incordous material means anything an eletance, hazardous material, pollutant	mental Information  Initions apply: Inte, or local statute or regulation concernaterial into the air, land, soil, surfaing the cleanup of these substances, wirty as defined under any environmental luding disposal sites.	erning pollution, contamination, relea ice water, groundwater, or other med wastes, or material. al law, whether you now own, operate ous waste, hazardous substance, toxi	ium, e, or utilize
art 10  Envir hazainclu Site r it or r Haza subs	Give Details About Environmental law means any federal, stardous or toxic substances, wastes, oding statutes or regulations controll means any location, facility, or properties of the company of the co	mental Information  Initions apply: Inte, or local statute or regulation concert material into the air, land, soil, surfaing the cleanup of these substances, with the disposal sites.  Invironmental law defines as a hazardo a contaminant, or similar term.	erning pollution, contamination, relea ice water, groundwater, or other med wastes, or material. al law, whether you now own, operate ous waste, hazardous substance, toxi	ium, e, or utilize ic
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or the p Envir hazai inclu Site r it or u Haza subs eport a	Give Details About Environmental law means any federal, stardous or toxic substances, wastes, oding statutes or regulations controll means any location, facility, or properties to own, operate, or utilize it, incordous material means anything an entance, hazardous material, pollutant, all notices, releases, and proceedings any governmental unit notified you the	mental Information  Initions apply: Inte, or local statute or regulation concert material into the air, land, soil, surfaing the cleanup of these substances, with the disposal sites.  Invironmental law defines as a hazardo a contaminant, or similar term.	erning pollution, contamination, relea ice water, groundwater, or other med wastes, or material. al law, whether you now own, operate ous waste, hazardous substance, toxi	ium, e, or utilize ic
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art 10 or the p Envir hazar inclu Site r it or or Haza subs deport a	Give Details About Environmental law means any federal, stardous or toxic substances, wastes, oding statutes or regulations controll means any location, facility, or properused to own, operate, or utilize it, incordous material means anything an extrance, hazardous material, pollutant all notices, releases, and proceeding any governmental unit notified you the	mental Information  Initions apply: Inte, or local statute or regulation concert material into the air, land, soil, surfaing the cleanup of these substances, with the distribution of these substances, with the distribution of these substances, with the distribution of these substances, with the cleanup of the cleanup of these substances, with the cleanup of	erning pollution, contamination, releaded water, groundwater, or other med wastes, or material.  al law, whether you now own, operate waste, hazardous substance, toxion when they occurred.	ium, e, or utilize ic mental law?
Part 10 for the p Envir haza inclu Site r it or o Haza subs Report a	Give Details About Environ  purpose of Part 10, the following defi  ronmental law means any federal, sta rdous or toxic substances, wastes, o ding statutes or regulations controll  means any location, facility, or prope used to own, operate, or utilize it, inc rdous material means anything an entance, hazardous material, pollutant all notices, releases, and proceeding any governmental unit notified you the lo les. Fill in the details.	mental Information  Initions apply: Ite, or local statute or regulation concert material into the air, land, soil, surfaing the cleanup of these substances, with the second material into the air, land, soil, surfaing the cleanup of these substances, with the second material into the air, land, soil, surfaining the cleanup of these substances, with the cleanup of the cleanup of these substances, with the cleanup of th	erning pollution, contamination, relead oce water, groundwater, or other med wastes, or material. al law, whether you now own, operate ous waste, hazardous substance, toxi when they occurred.	ium, e, or utilize ic mental law?
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art 10 for the p Envir hazar inclu Site r it or t Haza subs Report a	Give Details About Environ  purpose of Part 10, the following defi  ronmental law means any federal, sta rdous or toxic substances, wastes, o ding statutes or regulations controll  means any location, facility, or prope used to own, operate, or utilize it, inc rdous material means anything an entance, hazardous material, pollutant, all notices, releases, and proceedings any governmental unit notified you the location of site	mental Information  Initions apply: Ite, or local statute or regulation concert material into the air, land, soil, surfaing the cleanup of these substances, with the second material into the air, land, soil, surfaing the cleanup of these substances, with the second material into the air, land, soil, surfaining the cleanup of these substances, with the cleanup of the cleanup of these substances, with the cleanup of th	erning pollution, contamination, relead oce water, groundwater, or other med wastes, or material. al law, whether you now own, operate ous waste, hazardous substance, toxi when they occurred.	ium, e, or utilize ic mental law?

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	Gene R. Behrens First Name Middle Name L	ast Name	Case number (if known)	
ve	you notified any governmental unit	of any release of hazardous material?	4 11	
No				
Ye	es. Fill in the details.			
		Governmental unit Env	ironmental law, if you know it	Date of notice
N	Name of site	Governmental unit		
F	Number Street	Number Street		
-		City State ZIP Code		
c	City State ZIP Code	_		
ve	you been a party in any judicial or a	administrative proceeding under any envir	onmental law? Include settleme	nts and orders.
N	lo			
Ye	es. Fill in the details.			
		Court or agency	Nature of the case	Status of the case
C	ase title			-
00	ase title	Court Name		Pending
-				On appea
		Number Street		Conclude
C	aca number	_		
Ca	ase number	City State ZIP Code		
11:	: Give Details About Your B	usiness or Connections to Any Busin		o any business?
itti	Give Details About Your Bin 4 years before you filed for bankr A sole proprietor or self-employe A member of a limited liability co A partner in a partnership An officer, director, or managing An owner of at least 5% of the voto. None of the above applies. Go to	usiness or Connections to Any Busin uptcy, did you own a business or have an d in a trade, profession, or other activity, mpany (LLC) or limited liability partnershi executive of a corporation ting or equity securities of a corporation	Employer Identificate Do not include Sociated in 2014.  EIN: 4 7 - 1  Dates business existed in 2014.	tion number al Security number or ITIN. 6 0 9 5 6 9 sted To Present
11:	Give Details About Your Bin 4 years before you filed for bankr A sole proprietor or self-employed A member of a limited liability cold A partner in a partnership An officer, director, or managing An owner of at least 5% of the volo. None of the above applies. Go to les. Check all that apply above and GenoB Snacks Inc.  Business Name  495 Fairview Drive Number Street  Manhattan IL 60442	usiness or Connections to Any Busin uptcy, did you own a business or have an d in a trade, profession, or other activity, mpany (LLC) or limited liability partnershi executive of a corporation ting or equity securities of a corporation Part 12. fill in the details below for each business. Describe the nature of the business  Sold snack products on a route purchase  Name of accountant or bookkeeper Leonard & Associates (Thomas S. Leon	Employer Identificate Do not include Social Sed in 2014.  EIN: 4 7 - 1  Dates business existed and the properties of the	tion number al Security number or ITIN. 6 0 9 5 6 9 sted To Present
11:	Give Details About Your Bin 4 years before you filed for bankrand A sole proprietor or self-employed A member of a limited liability condition A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume of the above applies. Go to less Check all that apply above and for Genob Snacks Inc.  Business Name  495 Fairview Drive Number Street  Manhattan IL 60442 City State ZIP Code	usiness or Connections to Any Busin uptcy, did you own a business or have an d in a trade, profession, or other activity, mpany (LLC) or limited liability partnershi executive of a corporation ting or equity securities of a corporation Part 12. fill in the details below for each business. Describe the nature of the business  Sold snack products on a route purchase  Name of accountant or bookkeeper Leonard & Associates (Thomas S. Leon	Employer Identificate Do not include Social Do not include Social Employer Identificate Dates business exists and the second Employer Identificate Do not include Social Do not include Social Do not include Social Do not include Social Position    Employer Identificate Do not include Social Position    Employer Identificate Do not include Social Position    Employer Identificate    Do not include Social Position    Employer Identificate    Do not include Social Position    Employer Identificate    Do not include Social Position    Employer Identificate    Do not include Social Position    Employer Identificate    Do not include Social Position    Employer Identificate    Do not include Social Position    Employer Identificate    Do not include Social Position    Employer Identificate    Employer Identificate    Do not include Social Position    Employer Identificate    Employer Identificate    Employer Identificate    Employer Identificate    Do not include Social Position    Employer Identificate    Employer Identificate    Do not include Social Position    Employer Identificate    Employer Identificate	tion number al Security number or ITIN. 6 0 9 5 6 9 sted To Present tion number al Security number or ITIN.
11:	Give Details About Your Bin 4 years before you filed for bankrand A sole proprietor or self-employed A member of a limited liability condition A partner in a partnership An officer, director, or managing An owner of at least 5% of the volume of the above applies. Go to less Check all that apply above and for Genob Snacks Inc.  Business Name  495 Fairview Drive Number Street  Manhattan IL 60442 City State ZIP Code	usiness or Connections to Any Busin uptcy, did you own a business or have an d in a trade, profession, or other activity, mpany (LLC) or limited liability partnershi executive of a corporation ting or equity securities of a corporation Part 12. fill in the details below for each business. Describe the nature of the business  Sold snack products on a route purchase  Name of accountant or bookkeeper Leonard & Associates (Thomas S. Leon Describe the nature of the business	Employer Identificate Do not include Social EIN:	tion number al Security number or ITIN.  6 0 9 5 6 9 sted  To Present tion number al Security number or ITIN.
11: ithir	Give Details About Your Bin 4 years before you filed for banknown A sole proprietor or self-employed A member of a limited liability color A partner in a partnership An officer, director, or managing An owner of at least 5% of the volor. None of the above applies. Go to des. Check all that apply above and described Snacks Inc.  Business Name  495 Fairview Drive Number Street  Manhattan IL 60442 City State ZIP Code	usiness or Connections to Any Busin uptcy, did you own a business or have an d in a trade, profession, or other activity, mpany (LLC) or limited liability partnershi executive of a corporation ting or equity securities of a corporation Part 12. fill in the details below for each business. Describe the nature of the business  Sold snack products on a route purchase  Name of accountant or bookkeeper Leonard & Associates (Thomas S. Leon	Employer Identificate Do not include Social Do not include Social Employer Identificate Dates business exists and the second Employer Identificate Do not include Social Do not include Social Do not include Social Do not include Social Position    Employer Identificate Do not include Social Position    Employer Identificate Do not include Social Position    Employer Identificate    Do not include Social Position    Employer Identificate    Do not include Social Position    Employer Identificate    Do not include Social Position    Employer Identificate    Do not include Social Position    Employer Identificate    Do not include Social Position    Employer Identificate    Do not include Social Position    Employer Identificate    Do not include Social Position    Employer Identificate    Employer Identificate    Do not include Social Position    Employer Identificate    Employer Identificate    Employer Identificate    Employer Identificate    Do not include Social Position    Employer Identificate    Employer Identificate    Do not include Social Position    Employer Identificate    Employer Identificate	tion number al Security number or ITIN.  6 0 9 5 6 9 sted  To Present tion number al Security number or ITIN.
111:	Give Details About Your Bin 4 years before you filed for banknown A sole proprietor or self-employed A member of a limited liability color A partner in a partnership An officer, director, or managing An owner of at least 5% of the volor. None of the above applies. Go to des. Check all that apply above and described Snacks Inc.  Business Name  495 Fairview Drive Number Street  Manhattan IL 60442 City State ZIP Code	usiness or Connections to Any Busin uptcy, did you own a business or have an d in a trade, profession, or other activity, mpany (LLC) or limited liability partnershi executive of a corporation ting or equity securities of a corporation Part 12. fill in the details below for each business. Describe the nature of the business  Sold snack products on a route purchase  Name of accountant or bookkeeper Leonard & Associates (Thomas S. Leon Describe the nature of the business	Employer Identificate Do not include Social Seed in 2014.  EIN: 4 7 - 1  Dates business existence Do not include Social Employer Identificate Do not include Social Employer Identificate Do not include Social Employer Identificate Do not include Social EIN:  Dates business existence Do not include Social EIN:	tion number al Security number or ITIN.  6 0 9 5 6 9 sted  To Present tion number al Security number or ITIN.

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r 1 Gene R. Behrens	Case	e number (if known)
First Name Middle Name Last Name		
		Employer Identification number
D	escribe the nature of the business	Employer Identification number  Do not include Social Security number or ITIN.
Business Name		Do not include occur ecounty hamber of this.
		EIN:
Number Street N	ame of accountant or bookkeeper	Dates business existed
		From To
City State ZIP Code		
Nithin 2 years before you filed for bankruptcy, on stitutions, creditors, or other parties.	did you give a financial statement to any	yone about your business? Include all financial
No The second se		
Yes. Fill in the details below.		
D	ate issued	
Name	M / DD / YYYY	
Number Street		
Number Street  City State ZIP Code		
City State ZIP Code		
City State ZIP Code		
City State ZIP Code  1 12: Sign Below  I have read the answers on this Statement of I	Financial Affairs and any attachments, a	and I declare under penalty of perjury that the
City State ZIP Code  1 have read the answers on this Statement of it answers are true and correct. I understand that	at making a false statement, concealing	property, or obtaining money or property by fraud
City State ZIP Code  1 12: Sign Below  I have read the answers on this Statement of I answers are true and correct. I understand that in connection with a bankruptcy case can rest	at making a false statement, concealing	property, or obtaining money or property by fraud
City State ZIP Code  112: Sign Below  I have read the answers on this Statement of I answers are true and correct. I understand that in connection with a bankruptcy case can rest	at making a false statement, concealing	property, or obtaining money or property by fraud
City State ZIP Code  1 12: Sign Below  I have read the answers on this Statement of Panswers are true and correct. I understand that in connection with a bankruptcy case can result U.S.C. §§ 152, 1341, 1519, and 3571.	at making a false statement, concealing ult in fines up to \$250,000, or imprisonm	property, or obtaining money or property by fraud
City State ZIP Code  112: Sign Below  I have read the answers on this Statement of it answers are true and correct. I understand that in connection with a bankruptcy case can result U.S.C. §§ 152, 1341, 1519, and 3571.	at making a false statement, concealing ult in fines up to \$250,000, or imprisonm	property, or obtaining money or property by fraud
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Sign Below  I have read the answers on this Statement of I answers are true and correct. I understand that in connection with a bankruptcy case can result U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 1  Date	at making a false statement, concealing ult in fines up to \$250,000, or imprisonm  Signature of Debtor 2  Date	property, or obtaining money or property by fraud nent for up to 20 years, or both.
Sign Below  I have read the answers on this Statement of I answers are true and correct. I understand the in connection with a bankruptcy case can result U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 1  Date  Did you attach additional pages to Your Statement of I answers are true and correct. I understand the inconnection with a bankruptcy case can result in connection with a bankruptcy case c	at making a false statement, concealing ult in fines up to \$250,000, or imprisonm  Signature of Debtor 2  Date	property, or obtaining money or property by fraud nent for up to 20 years, or both.
City State ZIP Code  1 have read the answers on this Statement of it answers are true and correct. I understand that in connection with a bankruptcy case can result U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 1  Date  Did you attach additional pages to Your Statement of No.	at making a false statement, concealing ult in fines up to \$250,000, or imprisonm  Signature of Debtor 2  Date	property, or obtaining money or property by fraud nent for up to 20 years, or both.
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City State ZIP Code  1 have read the answers on this Statement of I answers are true and correct. I understand that in connection with a bankruptcy case can result U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 1  Date  Did you attach additional pages to Your Statement of Yes	at making a false statement, concealing ult in fines up to \$250,000, or imprisonm  Signature of Debtor 2  Date ment of Financial Affairs for Individuals	property, or obtaining money or property by fraudment for up to 20 years, or both.  Filling for Bankruptcy (Official Form 107)?
City State ZIP Code  1 have read the answers on this Statement of I answers are true and correct. I understand that in connection with a bankruptcy case can result U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 1  Date  Did you attach additional pages to Your Statem  No  Yes  Did you pay or agree to pay someone who is not the content of the content of I answers are true and correct. I understand that in connection with a bankruptcy case can result	at making a false statement, concealing ult in fines up to \$250,000, or imprisonm  Signature of Debtor 2  Date ment of Financial Affairs for Individuals	property, or obtaining money or property by fraud nent for up to 20 years, or both.  Filing for Bankruptcy (Official Form 107)?
Sign Below  I have read the answers on this Statement of I answers are true and correct. I understand the in connection with a bankruptcy case can result I U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 1  Date  Did you attach additional pages to Your Statement of I yes  Did you pay or agree to pay someone who is not in I was not	at making a false statement, concealing ult in fines up to \$250,000, or imprisonm  Signature of Debtor 2  Date ment of Financial Affairs for Individuals and the content of the con	property, or obtaining money or property by fraud nent for up to 20 years, or both.  Filing for Bankruptcy (Official Form 107)?

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Ally P.O. Box 380901 Bloomington, MN 55438

Banc Of America Leasing & Capital, LLC 135 N. La Salle Street Chicago, IL 60603

Bank of America P.O. Box 15026 Wilmington, DE 19850-5026

Best Buy Credit Services PO Box 790441 St. Louis, 63179

Chase

Attention: Bankruptcy Department, 800 Br Westerville, OH 43801

Comenity Bank 4590 E. Broad St. Columbus, OH 43213

GenoB Snacks, Inc. 495 Fairview Dr. Manhattan, IL 60442

Kohls Department Stores N 56 W 17000 Ridgewood Dr. Menomonee Falls, WI 53051

NAVIENT PO Box 9500 Wilks Barre, PA 18773-9500 Case 17-31206 Doc 1 Filed 10/18/17 Entered 10/18/17 13:58:59 Desc Main Document Page 54 of 59

Wells Fargo (P.O. Box 10335, Des Moines, P.O. Box 10335 Des Moines, IA 50306-0368

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Ally P.O. Box 380901 Bloomington, MN 55438

Banc Of America Leasing & Capital, LLC 135 N. La Salle Street Chicago, IL 60603

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NAVIENT PO Box 9500 Wilks Barre, PA 18773-9500 Case 17-31206 Doc 1 Filed 10/18/17 Entered 10/18/17 13:58:59 Desc Main Document Page 56 of 59

Wells Fargo (P.O. Box 10335, Des Moines, P.O. Box 10335 Des Moines, IA 50306-0368 Case 17-31206 Doc 1 Filed 10/18/17 Entered 10/18/17 13:58:59 Desc Main Document Page 57 of 59

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

In Re:		Bankruptcy Case Number:
Ge	ne R. Behrens	
	VERIFICAT	ION OF CREDITOR MATRIX
		Number of Creditors:
The abov	ve named Debtor(s) hereby verifies that the lis ge.	t of creditors is true and correct to the best of my (our)
Dated:	10/12/2017	Ger R. Behn
		Debtor
		Joint Debtor

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In	re	Gene R. Behrens				
				Case No.		
De	bto	r		Chapter 7		
		DISCLOSURE	OF COMPENSATION OF	ATTORNEY FOR DEBTO	R	
1.	na ba	med debtor(s) and that comp nkruptcy, or agreed to be pa	a) and Fed. Bankr. P. 2016(b), beensation paid to me within on id to me, for services rendered tion with the bankruptcy case i	e year before the filing of the or to be rendered on behalf or	petition in	
	Fo	r legal services, I have agree	ed to accept	\$ <u>2,585.0</u>	0	
	Pri	ior to the filing of this staten	nent I have received	\$870.00	)	
	Ba	lance Due			00	
2.	Th	The source of the compensation paid to me was:				
		X Debtor	Other (specify)			
3.	Th	e source of compensation to	be paid to me is:			
		X Debtor	Other (specify)			
4.		I have not agreed to sh members and associates of	nare the above-disclosed comp f my law firm.	ensation with any other perso	n unless they are	
		I have agreed to share members or associates of r people sharing in the comp	the above-disclosed compensa my law firm. A copy of the agr censation, is attached.	ation with a other person or percent, together with a list o	ersons who are not f the names of the	
5.	In	return for the above-disclose e, including:	ed fee, I have agreed to render	legal service for all aspects of	the bankruptcy	
	a.	Analysis of the debtor's fi file a petition in bankrupto	nancial situation, and rendering	g advice to the debtor in deter	mining whether to	
	b.	Preparation and filing of an	ny petition, schedules, stateme	nts of affairs and plan which	may be required;	
	c.	Representation of the debte hearings thereof;	or at the meeting of creditors a	nd confirmation hearing, and	any adjourned	

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- d. Representation of the debtor-in-adversary proceedings and other contested bankruptcy-matters;
- e. [Other provisions as needed]

The amount disclosed above represents attorney fee of \$2,250,00 plus costs of \$335.00

By agreement with the debtor(s), the above-disclosed fee does not include the following services:
 Adversary proceedings, if any.

OFDTI	TT	CAT	TEAT
CERT	IFI	LAI	LON

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to

me for representation of the debtor(s) in this bankruptcy proceeding.

Date

Signature of Attorney

Sbertoli Law Office

Name of law firm